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Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | art 1: Identify Yourself | | |
|----|--|--|--|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. | Takara First name Nichele Middle name Jackson Last name Suffix (Sr., Jr., II, III) | First name Middle name Last name Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years Include your married or maiden names. | First name Middle name | First name Middle name |
| | | Last name | Last name |
| | | First name Middle name | First name Middle name |
| | | | |
| | | Last name | Last name |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx - xx - 1 7 8 6 OR 9 xx - xx | xxx - xx |

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| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|---|---|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in | ☑ I have not used any business names or EINs. | ☐ I have not used any business names or EINs. |
| | the last 8 years | Business name | Business name |
| | Include trade names and doing business as names | Business name | Business name |
| | | EIN | EIN |
| | | EIN | EIN — — — — — — — — — — — — — — — — — — — |
| 5. | Where you live | | If Debtor 2 lives at a different address: |
| | | 2601 Frankford Road, Apt. 503 Number Street | Number Street |
| | | Dallas TX 75287 City State ZIP Code | City State ZIP Code |
| | | DENTON County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number Street | Number Street |
| | | P.O. Box | P.O. Box |
| | | City State ZIP Code | City State ZIP Code |
| 6. | Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |

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| Pa | art 2: | Tell the Court Abou | t Your B | ankrup | otcy Case | | |
|-----|-----------------|---|------------------------|----------------------------------|--|---|--|
| 7. | Bankr | napter of the uptcy Code you | Check or for Banki | ne. (For ruptcy (F | a brief description of each, see <i>Noti</i> Form 2010)). Also, go to the top of p | ce Required by 11 age 1 and check th | U.S.C. § 342(b) for Individuals Filing ne appropriate box. |
| | are ch under | oosing to file | ☑ Chap | oter 7 | | | |
| | | | ☐ Chap | oter 11 | | | |
| | | | ☐ Chap | oter 12 | | | |
| | | | ☐ Chap | oter 13 | | | |
| 8. | How y | ou will pay the fee | local your subn | court f self, yo nitting y | ne entire fee when I file my pet or more details about how you n u may pay with cash, cashier's o your payment on your behalf, yo orinted address. | nay pay. Typicall check, or money | order. If your attorney is |
| | | | | | ay the fee in installments. If yo | | |
| | | | Appl | ication | for Individuals to Pay The Filing | Fee in Installme | nts (Official Form 103A). |
| | | | By la less pay t | w, a ju than 15 he fee | dge may, but is not required to, 50% of the official poverty line th | waive your fee, a at applies to you nis option, you m | ion only if you are filing for Chapter 7. and may do so only if your income is r family size and you are unable to ust fill out the <i>Application to Have the</i> with your petition. |
| 9. | Have | you filed for | □ No | | | | |
| | | uptcy within the years? | | District | Northern District of Illinois When | 03/01/2016 MM / DD / YYYY | Case number 16-05380 |
| | | | | District | When | | Case number |
| | | | | | | MM / DD / YYYY | _ |
| | | | | District | When | MM / DD / YYYY | Case number |
| 10 | Are ar | ny bankruptcy | | | | | |
| 10. | cases | pending or being | X No □ vos | Dobtor | | | Polationship to you |
| | | y a spouse who is ing this case with | ☐ Yes. | | | | Case number, if known |
| | | or by a business er, or by an te? | | Diotilot | | MM / DD / YYYY | Case named, a wiem |
| | | | | Debtor | | | Relationship to you |
| | | | | District | When | MM / DD / YYYY | Case number, if known |
| 11. | Do yo reside | u rent your nce? | ☐ No. ☑ Yes. | X No □ Ye | our landlord obtained an eviction judg . Go to line 12. | | ? t Against You (Form 101A) and file it as |

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| Are you a sole proprietor | 🛛 No. | Go to Part 4. | | | | |
|---|-------|--|--------------------|-----------------------|--------------------|-------------------|
| of any full- or part-time business? | ☐ Yes | . Name and location of bu | usiness | | | |
| A sole proprietorship is a | | | | | | |
| business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or | | Name of business, if any | | | | |
| LLC. | | Number Street | | | | |
| If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. | | City | | | ZIP Code | |
| | | Oity | | State | Zii Code | |
| | | Check the appropriate b | oox to describe ye | our business: | | |
| | | ☐ Health Care Busines | ss (as defined in | 11 U.S.C. § 101(27A) |) | |
| | | ☐ Single Asset Real E | state (as defined | in 11 U.S.C. § 101(51 | B)) | |
| | | ☐ Stockbroker (as defi | ned in 11 U.S.C. | § 101(53A)) | | |
| | | ☐ Commodity Broker (| as defined in 11 | U.S.C. § 101(6)) | | |
| | | ■ None of the above | | | | |
| business debtor, see 11 U.S.C. § 101(51D). art 4: Report if You Own | ☐ Yes | I am filing under Chapte the Bankruptcy Code. I am filing under Chapte Bankruptcy Code. Any Hazardous Prop | er 11 and I am a s | small business debtor | according to the o | definition in the |
| . Do you own or have any | X No | | | | | |
| property that poses or is alleged to pose a threat | Yes | . What is the hazard? | | | | |
| of imminent and identifiable hazard to public health or safety? Or do you own any | | · · · · · · · · · · · · · · · · · · · | | | | |
| property that needs immediate attention? | | If immediate attention i | is needed, why is | it needed? | | |
| For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | | | | | |
| | | Where is the property? | | Street | | |
| | | | | | | |
| | | | City | | State | ZIP Code |

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Debtor 1 Takara Nichele Jackson

st Name Middle Name

Last Name

Case number (if known)_____

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about |
|---|
| credit counseling because of: |

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

 ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing a | bout |
|---|------|
| credit counseling because of: | |

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Part 6: Answer These Que | stions for Reporting Purpos | ses | |
|--|---|--|--|
| 16. What kind of debts do you have? | | rily consumer debts? Consume aal primarily for a personal, family, o | er debts are defined in 11 U.S.C. § 101(8) or household purpose." |
| | | rily business debts? Business of the operation of the ope | debts are debts that you incurred to obtain of the business or investment. |
| | ☐ No. Go to line 16c. ☐ Yes. Go to line 17. | | |
| | | u owe that are not consumer debts | or business debts. |
| | | | |
| 17. Are you filing under Chapter 7? | ☐ No. I am not filing under C | hapter 7. Go to line 18. | |
| Do you estimate that after any exempt property is | | ter 7. Do you estimate that after any es are paid that funds will be availal | y exempt property is excluded and ble to distribute to unsecured creditors? |
| excluded and administrative expenses | ⊠ No | | |
| are paid that funds will be available for distribution to unsecured creditors? | ☐ Yes | | |
| 18. How many creditors do | X 1-49 | 1 ,000-5,000 | 2 5,001-50,000 |
| you estimate that you owe? | 50-99 | 5,001-10,000 | 50,001-100,000 |
| | ☐ 100-199 ☐ 200-999 | 1 0,001-25,000 | ☐ More than 100,000 |
| 19. How much do you | X \$0-\$50,000 | □ \$1,000,001-\$10 million | ☐ \$500,000,001-\$1 billion |
| estimate your assets to be worth? | \$50,001-\$100,000 | \$10,000,001-\$50 million | \$1,000,000,001-\$10 billion |
| be worth: | □ \$100,001-\$500,000 □ \$500,001-\$1 million | \$50,000,001-\$100 million \$100,000,001-\$500 million | |
| 20. How much do you | \$0-\$50,000 | □ \$1,000,001-\$10 million | □ \$500,000,001-\$1 billion |
| estimate your liabilities | \$50,001-\$100,000 | ☐ \$10,000,001-\$50 million | ☐ \$1,000,000,001-\$10 billion |
| to be? | \$100,001-\$500,000 | \$50,000,001-\$100 million | |
| Part 7: Sign Below | □ \$500,001-\$1 million | □ \$100,000,001-\$500 million | n ☐ More than \$50 billion |
| Sign Below | | | |
| For you | I have examined this petition, a correct. | and I declare under penalty of perjur | y that the information provided is true and |
| | | | ceed, if eligible, under Chapter 7, 11,12, or 13 der each chapter, and I choose to proceed |
| | | nd I did not pay or agree to pay som and read the notice required by 11 | neone who is not an attorney to help me fill out U.S.C. § 342(b). |
| | I request relief in accordance w | vith the chapter of title 11, United St | ates Code, specified in this petition. |
| | | sult in fines up to \$250,000, or impris | taining money or property by fraud in connection sonment for up to 20 years, or both. |
| | s/Takara Nichele Jackso | on * | |
| | Signature of Debtor 1 | | gnature of Debtor 2 |
| | Executed on $\frac{04/03/2019}{MM / DD}$ | | ecuted on |

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| or your attorney, if you are epresented by one | I, the attorney for the debtor(s) named in this pet to proceed under Chapter 7, 11, 12, or 13 of title available under each chapter for which the perso the notice required by 11 U.S.C. § 342(b) and, in | 11, United States Code, an n is eligible. I also certify the | d have explained the relief at I have delivered to the debtor(s |
|---|--|--|---|
| you are not represented y an attorney, you do not | knowledge after an inquiry that the information in | • | |
| eed to file this page. | ★ s//s/Michael B. Suffness | Date | 04/03/2019 |
| | Signature of Attorney for Debtor | | MM / DD /YYYY |
| | Michael B. Suffness | | |
| | Printed name | | |
| | Michael B. Suffness PC | | |
| | Firm name | | |
| | 5201 W. Park Blvd., Ste. 100 | | |
| | Number Street | | |
| | Plano | TX | 75093 |
| | City | State | ZIP Code |
| | Contact phone (972) 985-1331 | Email address | msuff@aol.com |
| | | | |
| | 19463700 | TX | - |
| | | State | |

Debtor 1

| Fill in this information to identify your case and this filing: | | | | | | |
|---|---------------------------|------------------------|----------------------|--|--|--|
| Debtor 1 | Takara First Name | Nichele Middle Name | Jackson Last Name | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court for the: | Eastern District of | Texas | | | |
| Case number | | | | | | |

Official Form 106A/B

Schedule A/B: Property

12/15

☐ Check if this is an amended filing

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

| Yes. Where is the property? | What is the property? Check all that apply. Single-family home Duplex or multi-unit building | Do not deduct secured cla the amount of any secure Creditors Who Have Clair | d claims on <i>Schedule D</i> |
|---|--|---|--------------------------------------|
| Street address, if available, or other description | Condominium or cooperativeManufactured or mobile home | Current value of the entire property? | Current value of t portion you own? |
| City State ZIP Code | ☐ Land ☐ Investment property ☐ Timeshare ☐ Other | Describe the nature of interest (such as fee the entireties, or a life | of your ownership simple, tenancy by |
| County | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite | Check if this is co | ommunity property |
| you own or have more than one, list here: | property identification number: What is the property? Check all that apply. | | |
| 1.2. | ☐ Single-family home☐ Duplex or multi-unit building | Do not deduct secured cla the amount of any secure Creditors Who Have Clair | d claims on <i>Schedule</i> i |
| Street address it available or other description | Condominium or cooperative Manufactured or mobile home | Current value of the entire property? | Current value of portion you own |
| Street address, if available, or other description | | Φ | Φ |
| Street address, if available, or other description City State ZIP Code | □ Land □ Investment property □ Timeshare □ Other | Describe the nature of interest (such as fee the entireties, or a life | simple, tenancy by |
| | □ Land □ Investment property □ Timeshare □ Other Who has an interest in the property? Check one. □ Debtor 1 only | interest (such as fee | simple, tenancy by |
| | □ Land □ Investment property □ Timeshare □ Other Who has an interest in the property? Check one. | interest (such as fee | simple, t |

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| 1.3. | Street address, if available, or other | r description | ☐ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative ☐ Manufactured or mobile home ☐ Land | Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ | d claims on <i>Schedule D:</i> |
|---|---|--|---|---|--|
| | City Stat | e ZIP Code | ☐ Investment property ☐ Timeshare ☐ Other ☐ Who has an interest in the property? Check one. | Describe the nature of interest (such as fee the entireties, or a life | simple, tenancy by |
| | County | | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite property identification number: | | ommunity property |
| | | | II of your entries from Part 1, including any entries | | \$ |
| - | own, lease, or have legal or ec | quitable intere | st in any vehicles, whether they are registered or re, also report it on Schedule G: Executory Contracts a | | s |
| o you ou own Cars X N | own, lease, or have legal or ed that someone else drives. If you , vans, trucks, tractors, sport | quitable intere u lease a vehicl | e, also report it on <i>Schedule G: Executory Contracts</i> as, motorcycles | and Unexpired Leases. | |
| o you o ou own Cars | own, lease, or have legal or ed that someone else drives. If you , vans, trucks, tractors, sport | quitable intere u lease a vehicl | e, also report it on <i>Schedule G: Executory Contracts</i> and an interest in the property? Check one. Debtor 1 only | | aims or exemptions. Put d claims on <i>Schedule D:</i> |
| o you ou own Cars X N | own, lease, or have legal or ed that someone else drives. If you wans, trucks, tractors, sport lo es Make: Model: Year: Approximate mileage: | uitable intere | e, also report it on Schedule G: Executory Contracts as, motorcycles Who has an interest in the property? Check one. | Do not deduct secured clatte amount of any secure | aims or exemptions. Put d claims on <i>Schedule D:</i> |
| o you ou own Cars X N | own, lease, or have legal or ed that someone else drives. If you wans, trucks, tractors, sport lo es Make: Model: Year: | uitable intere | e, also report it on Schedule G: Executory Contracts and specific property? Check one. Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured clathe amount of any secure Creditors Who Have Clair | aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the portion you own? |
| o you ou our our our our our our our our ou | own, lease, or have legal or ed that someone else drives. If you wans, trucks, tractors, sport lo es Make: Model: Year: Approximate mileage: | juitable interedule lease a vehicles | e, also report it on Schedule G: Executory Contracts as, motorcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see | Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? | aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the portion you own? |
| o you ou our our our our our our our our ou | own, lease, or have legal or ed that someone else drives. If you wans, trucks, tractors, sport lo les Make: Model: Year: Approximate mileage: Other information: | juitable interedule lease a vehicles | e, also report it on Schedule G: Executory Contracts and some series, motorcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only | Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? | aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$ |
| o you ou our our our our our our our our ou | own, lease, or have legal or ed that someone else drives. If you wans, trucks, tractors, sport to lo les Make: | juitable interedule lease a vehicles | e, also report it on Schedule G: Executory Contracts and another Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Do not deduct secured clathe amount of any secure Creditors Who Have Clain Current value of the entire property? \$ Do not deduct secured clathe amount of any secure creditors. | aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$ |

| Debtor 1 | Case 19-40922 Doc 1 Takara Nichele Jack First Name Middle Name Last No. | son Document Page 10 of 68 number (if A | | /lain |
|----------------|---|---|--|--|
| 3.3. | Make: Model: Year: Approximate mileage: Other information: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Do not deduct secured cla the amount of any securec Creditors Who Have Clain Current value of the entire property? \$ | d claims on Schedule D: ns Secured by Property. |
| | nples: Boats, trailers, motors, personal water to | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | | d claims on Schedule D: ns Secured by Property. |
| 4.1. If you | Make: Model: Year: Other information: I own or have more than one, list here: | Who has an interest in the property? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see instructions) | Do not deduct secured cla the amount of any secured Creditors Who Have Clain Current value of the entire property? \$ | d claims on Schedule D: ns Secured by Property. |
| 4.2. | Make: Model: Year: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured cla the amount of any secured Creditors Who Have Clain Current value of the | d claims on Schedule D: |

| .2. | Make: | Who has an interest in the property? Check one |
|-----|--------------------|--|
| | Model: | Debtor 1 only |
| | | Debtor 2 only |
| | Year: | Debtor 1 and Debtor 2 only |
| | Other information: | At least one of the debtors and another |

☐ At least one of the debtors and another ☐ Check if this is community property (see instructions) entire property? portion you own?

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

| | \$ |
|----------|----|
| → | |

| Part 3: | Describe | Your | Personal | and | Household | Items |
|---------|----------|------|----------|-----|-----------|-------|
| | | | | | | |

| Do you own or have any legal or equitable interest in any of the following items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
|--|--|
| 6. Household goods and furnishings | |
| Examples: Major appliances, furniture, linens, china, kitchenware | |
| □ No | |
| Yes. Describe couch; 2 queen beds; 2 dressers; 2 accent chairs; blender; crockpot | \$268.00 |
| | |
| 7. Electronics | |
| Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games | |
| □ No | |
| Yes. Describe 32 inch tv; 42 inch tv | \$ <u>115.00</u> |
| 8. Collectibles of value | |
| Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; | |
| stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No | |
| Yes. Describe | \$ |
| 9. Equipment for sports and hobbies | |
| Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes | |
| and kayaks; carpentry tools; musical instruments | |
| No No | |
| Yes. Describe | \$ |
| 10. Firearms | |
| Examples: Pistols, rifles, shotguns, ammunition, and related equipment | |
| No | |
| Yes. Describe | \$ |
| 11. Clothes | |
| Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories | |
| No | |
| Yes. DescribeClothing | \$100.00 |
| | |
| 12. Jewelry | |
| Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver | |
| X No | |
| Yes. Describe | \$ |
| 13. Non-farm animals | |
| Examples: Dogs, cats, birds, horses | |
| No No | |
| Yes. Describe | \$ |
| 14. Any other personal and household items you did not already list, including any health aids you did not list | |
| ☒ No | |
| ☐ Yes. Give specific | \$ |
| information | |
| 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here | \$483.00 |
| IOI 1 dit O. Title that number here | |

| Case. | 19-40922 | DOC 1 FIIEU 04/03/19 | EIIIGIGU 04/03/13 10.41.10 | Desc Main |
|------------|-------------|----------------------|---------------------------------|-----------|
| Takara | Nichele | Jackson Document | Page 12 of 68 number (if known) | |
| First Name | Middle Name | Last Name | 1 ago 12 01 00 | |

Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition X No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ■ No X Yes..... Institution name: Wells Fargo-xxx0698 \$200.00 17.1. Checking account: 17.2. Checking account: Wells Fargo-xxx1616 \$200.00 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts XI No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture X No Name of entity: % of ownership: ☐ Yes. Give specific information about them.....

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| | | ks, cashiers' checks, promissory notes, and money orders. not transfer to someone by signing or delivering them. | |
|--|---|--|--|
| ☑ No☑ Yes. Give specific information about | Issuer name: | | |
| them | | | \$ |
| | | | \$ |
| | | | \$ |
| | | 01(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans | |
| □ No | | | |
| Yes. List each account separately. | . Type of account: | Institution name: | |
| | 401(k) or similar plan: | ADP | \$0.00 |
| | Pension plan: | | \$ |
| | IRA: | | \$ |
| | Retirement account: | | \$ |
| | Keogh: | | \$ |
| | Additional account: | | \$ |
| | | | |
| | | ade so that you may continue service or use from a company | \$ |
| Examples: Agreements companies, or others | prepayments d deposits you have m | ade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications | \$ |
| Your share of all unused Examples: Agreements companies, or others | prepayments d deposits you have m | ade so that you may continue service or use from a company | \$ |
| Your share of all unused Examples: Agreements companies, or others | prepayments d deposits you have m with landlords, prepaid | ade so that you may continue service or use from a company | \$ |
| Your share of all unused Examples: Agreements companies, or others | prepayments d deposits you have m with landlords, prepaid | ade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications | \$\$ |
| Your share of all unused Examples: Agreements companies, or others | prepayments d deposits you have m with landlords, prepaid Ins Electric: Gas: | ade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications | \$\$ \$\$ |
| Your share of all unused Examples: Agreements companies, or others | prepayments d deposits you have m with landlords, prepaid Ins Electric: Gas: Heating oil: | ade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications titution name or individual: | \$ \$ \$ |
| Your share of all unused Examples: Agreements companies, or others | prepayments d deposits you have m with landlords, prepaid Ins Electric: Gas: Heating oil: Security deposit on ren | ade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications | \$\$ \$\$ \$\$300.00 |
| Your share of all unused Examples: Agreements companies, or others | prepayments d deposits you have m with landlords, prepaid Ins Electric: Gas: Heating oil: Security deposit on ren Prepaid rent: | ade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications titution name or individual: | \$ \$ \$ |
| Your share of all unused Examples: Agreements companies, or others | prepayments d deposits you have m with landlords, prepaid Ins Electric: Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone: | ade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications titution name or individual: | \$ \$ \$ |
| Your share of all unused Examples: Agreements companies, or others | prepayments d deposits you have m with landlords, prepaid Ins Electric: Gas: Heating oil: Security deposit on ren Prepaid rent: | ade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications titution name or individual: | \$ \$ \$ |
| Your share of all unused Examples: Agreements companies, or others | prepayments d deposits you have m with landlords, prepaid Ins Electric: Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone: | ade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications titution name or individual: | \$ \$ \$ |
| Your share of all unused Examples: Agreements companies, or others | prepayments d deposits you have m with landlords, prepaid Ins Electric: Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone: Water: | ade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications titution name or individual: | \$\$ \$\$ \$300.00 \$\$ \$\$ |
| Your share of all unused Examples: Agreements companies, or others | prepayments d deposits you have m with landlords, prepaid Ins Electric: Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone: Water: Rented furniture: | ade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications titution name or individual: | \$\$ \$\$ \$300.00 \$\$ \$\$ |
| Your share of all unused Examples: Agreements companies, or others No Yes | prepayments d deposits you have m with landlords, prepaid Ins Electric: Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone: Water: Rented furniture: Other: | ade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications titution name or individual: | \$\$ \$\$ \$300.00 \$\$ \$\$ |
| Your share of all unused Examples: Agreements companies, or others No Yes | prepayments d deposits you have m with landlords, prepaid Ins Electric: Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone: Water: Rented furniture: Other: | ade so that you may continue service or use from a company dirent, public utilities (electric, gas, water), telecommunications titution name or individual: tal unit: Frankfurt Flats of money to you, either for life or for a number of years) | \$ \$ \$ |
| Your share of all unused Examples: Agreements companies, or others No Yes | prepayments d deposits you have m with landlords, prepaid Ins Electric: Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone: Water: Rented furniture: Other: | ade so that you may continue service or use from a company dirent, public utilities (electric, gas, water), telecommunications titution name or individual: tal unit: Frankfurt Flats of money to you, either for life or for a number of years) | \$\$ \$\$ \$300.00 \$\$ \$\$ |
| Your share of all unused Examples: Agreements companies, or others No Yes | prepayments d deposits you have m with landlords, prepaid Ins Electric: Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone: Water: Rented furniture: Other: | ade so that you may continue service or use from a company dirent, public utilities (electric, gas, water), telecommunications titution name or individual: tal unit: Frankfurt Flats of money to you, either for life or for a number of years) | \$\$ \$\$ \$300.00 \$\$ \$\$ |

| -5 5.5.5. 33 550(b)(i), 525/ | A(b), and 529(| (b)(1). | | |
|--|-----------------------------------|--|--|---|
| ☑ No | | | | |
| ☐ Yes | · Institution | name and description. Separately file the records of any interests | s.11 U.S.C. § 521(c): | |
| | | | | \$ |
| | | | | \$ |
| | | | | \$ |
| | | | | |
| 25. Trusts, equitable or future exercisable for your benef | | property (other than anything listed in line 1), and rights or p | owers | |
| ▼ No | | | | |
| Yes. Give specific information about them. | | | | \$ |
| | • | secrets, and other intellectual property | | |
| • | iames, websit | es, proceeds from royalties and licensing agreements | | |
| No | | | | |
| Yes. Give specific information about them. | | | | \$ |
| | | | | |
| 27. Licenses, franchises, and | | | | |
| Examples: Building permits, | exclusive lice | nses, cooperative association holdings, liquor licenses, profession | onal licenses | |
| ☑ No | | | | |
| Yes. Give specific information about them. | | | | \$ |
| inionnation about them. | | | | Ψ |
| Money or property owed to yo | ou? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | | | | |
| 28. Tax refunds owed to you | | | | |
| • | | | | |
| 28. Tax refunds owed to you No Yes. Give specific inform | ation | | oderal: \$ | |
| ☒ No☐ Yes. Give specific inform about them, including | ng whether | | rederal: \$ | |
| ☑ No☑ Yes. Give specific inform | ng whether e returns | S | State: \$ | |
| No Yes. Give specific inform about them, including your already filed the | ng whether e returns | S | , | |
| ☒ No☐ Yes. Give specific inform about them, including your already filed the and the tax years | ng whether e returns | S | State: \$ | |
| No Yes. Give specific inform about them, including your already filed the and the tax years | ng whether e returns | S L | State: \$ ocal: \$ | |
| No Yes. Give specific inform about them, including your already filed the and the tax years Pamily support Examples: Past due or lump | ng whether e returns | S | State: \$ ocal: \$ | |
| No Yes. Give specific inform about them, including your already filed the and the tax years Page Family support Examples: Past due or lump No | ng whether e returns | , spousal support, child support, maintenance, divorce settlemen | State: \$ ocal: \$ | |
| No Yes. Give specific inform about them, including your already filed the and the tax years Pamily support Examples: Past due or lump | ng whether e returns | , spousal support, child support, maintenance, divorce settlemen | State: \$ ocal: \$ | |
| No Yes. Give specific inform about them, including your already filed the and the tax years Pamily support Examples: Past due or lump No | ng whether e returns | spousal support, child support, maintenance, divorce settlemen | State: \$.ocal: \$ t, property settlemen | s |
| No Yes. Give specific inform about them, including your already filed the and the tax years Pamily support Examples: Past due or lump No | ng whether e returns sum alimony, | spousal support, child support, maintenance, divorce settlemen Al M. Su | State: \$.ocal: \$ t, property settlemen imony: aintenance: upport: | ss |
| No Yes. Give specific inform about them, including your already filed the and the tax years Pamily support Examples: Past due or lump No | ng whether e returns sum alimony, | spousal support, child support, maintenance, divorce settlemen Al M. St Di | State: \$ cocal: \$ t, property settlemen imony: aintenance: upport: vorce settlement: | s |
| No Yes. Give specific inform about them, including your already filed the and the tax years Pamily support Examples: Past due or lump No | ng whether e returns sum alimony, | spousal support, child support, maintenance, divorce settlemen Al M. St Di | State: \$.ocal: \$ t, property settlemen imony: aintenance: upport: | ss |
| No Yes. Give specific informabout them, including your already filed the and the tax years Pamily support Examples: Past due or lump No Yes. Give specific informations. Other amounts someone of Examples: Unpaid wages, divided in the support of the support | sum alimony, ation | spousal support, child support, maintenance, divorce settlemen Al M. St Di | chate: \$ chocal: | ss |
| No Yes. Give specific informabout them, including your already filed the and the tax years Pamily support Examples: Past due or lump No Yes. Give specific informations. Other amounts someone of Examples: Unpaid wages, divided in the support of the support | sum alimony, ation | spousal support, child support, maintenance, divorce settlemen Al M Su Di Pr | chate: \$ chocal: | ss |
| □ Yes. Give specific inform about them, including your already filed the and the tax years 29. Family support Examples: Past due or lump No Yes. Give specific inform 30. Other amounts someone of Examples: Unpaid wages, disocial Security by | sum alimony, ation | spousal support, child support, maintenance, divorce settlemen Al Mr. St. Di Pr. ance payments, disability benefits, sick pay, vacation pay, worked loans you made to someone else | chate: \$ chocal: | ss |

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| 31. | Interests in insurance policies Examples: Health, disability, or life insurance □ No | ce; health savings account (HSA); credit, homeo | wner's, or renter's insurance | |
|-----|--|---|---|--|
| | Yes. Name the insurance company of each policy and list its value | Company name: | Beneficiary: | Surrender or refund value: |
| | , , | Term through work | | \$0.00 |
| | | | | \$ |
| | | | | \$ |
| 32. | Any interest in property that is due you of you are the beneficiary of a living trust, exproperty because someone has died. ☑ No ☐ Yes. Give specific information | from someone who has died xpect proceeds from a life insurance policy, or ar | e currently entitled to receive | |
| | | | | \$ |
| 33. | Claims against third parties, whether or Examples: Accidents, employment disputes ☑ No ☐ Yes. Describe each claim | not you have filed a lawsuit or made a demar s, insurance claims, or rights to sue | nd for payment | |
| | Yes. Describe each claim | | | \$ |
| 34. | Other contingent and unliquidated claim to set off claims No | s of every nature, including counterclaims of | the debtor and rights | |
| | ☐ Yes. Describe each claim | | | \$ |
| | L | | | Φ |
| 35. | Any financial assets you did not already | list | | |
| | Yes. Give specific information | | | \$ |
| 36. | | s from Part 4, including any entries for pages | | \$700.00 |
| | | | | |
| Pa | rt 5: Describe Any Business-F | Related Property You Own or Have | an Interest In. List any r | eal estate in Part 1. |
| 37. | Do you own or have any legal or equitab | le interest in any business-related property? | | |
| | No. Go to Part 6. | | | |
| | Yes. Go to line 38. | | | Oursell relies of the |
| | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 38. | Accounts receivable or commissions yo | u already earned | | |
| | X No □ | | | 7 |
| | Yes. Describe | | | \$ |
| 39. | Office equipment, furnishings, and supp | | | _ |
| | Examples: Business-related computers, software No | , modems, printers, copiers, fax machines, rugs, telepho | ones, desks, chairs, electronic devices | |
| | Yes. Describe | | | \$ |
| | | | | |

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| 40. Machinery, fixtures, e | quipment, supplies you use in business, and tools of your trade | | |
|----------------------------|---|----------------------|---|
| ☑ No | | | |
| ☐ Yes. Describe | | | \$ |
| | | | Φ |
| | | | |
| 41. Inventory | | | |
| No I | | |]_ |
| ☐ Yes. Describe | | | \$ |
| | | | |
| 42. Interests in partnersh | ips or joint ventures | | |
| X No | | | |
| ☐ Yes. Describe | Name of entity: | % of ownership: | |
| | | % | \$ |
| | | % | \$ |
| | | % % | \$ |
| | | | Ψ |
| 43. Customer lists, mailir | ng lists, or other compilations | | |
| X No | - | | |
| Yes. Do your lists | include personally identifiable information (as defined in 11 U.S.C. § 101(41A) |))? | |
| X No | | | |
| Yes. Desc | | |] . |
| | | | \$ |
| | | | |
| 44. Any business-related | property you did not already list | | |
| Yes. Give specific | | | |
| information | | | \$ |
| | | | \$ |
| | | | \$ |
| | | | |
| | | | \$ |
| | | | \$ |
| | | | \$ |
| 45. Add the deller velve | of all of value antico from Days E. including any antico for pages you have at | aabad | |
| | of all of your entries from Part 5, including any entries for pages you have att number here | _ | \$0.00 |
| Tor I are o. Write that | | | |
| | | | |
| Part 6: Describe A | ny Farm- and Commercial Fishing-Related Property You Own or Ha | on Interest In | |
| | r have an interest in farmland, list it in Part 1. | ve all illterest ill | • |
| | | | |
| 46. Do you own or have a | ny legal or equitable interest in any farm- or commercial fishing-related prop | erty? | |
| No. Go to Part 7. | | - | |
| Yes. Go to line 47. | | | |
| | | | Current value of the |
| | | | portion you own? |
| | | | Do not deduct secured claims or exemptions. |
| 47. Farm animals | | | 2. 3.0publio. |
| Examples: Livestock, p | poultry, farm-raised fish | | |
| X No | | | |
| ☐ Yes | | | |
| | | | |
| | | | \$ |

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| 48. Crops—either growing or harvested | | | |
|--|--------------------|--------------------------------|---------------------|
| ▼ No Yes. Give specific information | | | \$ |
| 49. Farm and fishing equipment, implements, machinery, fixtures, No Yes | and tools of trade | | - |
| ☐ Yes | | | \$ |
| 50. Farm and fishing supplies, chemicals, and feed No | | | - |
| ☐ Yes | | | \$ |
| 51. Any farm- and commercial fishing-related property you did not | already list | | |
| Yes. Give specific information | | | \$ |
| 52. Add the dollar value of all of your entries from Part 6, including for Part 6. Write that number here | | | \$0.00 |
| | | | |
| Part 7: Describe All Property You Own or Have a | n Interest in That | You Did Not List Above | |
| 53. Do you have other property of any kind you did not already list Examples: Season tickets, country club membership | t? | | |
| ☒ No☐ Yes. Give specific | | | \$ |
| information | | | \$ \$ |
| | | | - |
| 54. Add the dollar value of all of your entries from Part 7. Write that | t number here | | \$ |
| Part 8: List the Totals of Each Part of this Form | | | |
| 55. Part 1: Total real estate, line 2 | | → | \$0.00 |
| 56. Part 2: Total vehicles, line 5 | \$ <u>0.00</u> | - | |
| 57. Part 3: Total personal and household items, line 15 | \$ <u>483.00</u> | - | |
| 58. Part 4: Total financial assets, line 36 | \$ <u>700.00</u> | - | |
| 59. Part 5: Total business-related property, line 45 | \$0.00 | - | |
| 60. Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | - | |
| 61. Part 7: Total other property not listed, line 54 | + \$0.00 | - | |
| 62. Total personal property. Add lines 56 through 61 | \$ <u>1,183.00</u> | Copy personal property total → | + \$1,183.00 |
| 63. Total of all property on Schedule A/B. Add line 55 + line 62 | | | <u>\$1,183.00</u> |

| Fill in this information to identify your case: | | | | | | |
|---|-----------------------|--|-----------|--|--|--|
| | | | | | | |
| Debtor 1 | <u>Takara Nichele</u> | Jackson | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | Final | ACT III A CONTRACTOR OF THE CO | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court fo | or the: Eastern District of T | exas | | | |
| Case number | | | | | | |

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| 2. | For any property you list on Schedule A/B th | nat you claim as exem | pt, fill in the information below. | |
|----|--|--------------------------------------|---|------------------------------------|
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Check only one box for each exemption | 1. |
| | Brief Clothing description: | \$ <u>100.00</u> | X \$ 100.00 | 11 USC § 522(d)(3) |
| | Line from Schedule A/B: 11 | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| | Brief Checking Account with Wells description: Fargo-xxxx0698 | \$200.00 | X \$ 200.00 | 11 USC § 522(d)(5) |
| | Line from Schedule A/B: 17.1 | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| | Brief Savings Account with Wells description: Fargo-xxxx1616 | \$200.00 | X \$ 200.00 | 11 USC § 522(d)(5) |
| | Line from Schedule A/B: 17.3 | | ☐ 100% of fair market value, up to any applicable statutory limit | |

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Takara Nichele Jackson

Last Name

Document Page 19 of 63 number (if known)_____

Debtor 1

Additional Page

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
|---|--------------------------------------|---|------------------------------------|
| | Copy the value from Schedule A/B | Check only one box for each exemption | n |
| Brief 401(k) or Similar Plan with ADP description: | \$0.00 | X \$ | 11 USC § 522(d)(12) |
| Line from Schedule A/B: 21 | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief Security Deposit on Rental Unit description: with Frankfurt Flats | \$300.00 | X \$ 300.00 | 11 USC § 522(d)(5) |
| Line from Schedule A/B: 22 | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief Insurance policy on with Term description: through work | \$0.00 | X \$ | 11 USC § 522(d)(7) |
| Line from Schedule A/B: 31 | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief 32 inch tv description: | \$40.00 | X \$ 40.00 | 11 USC § 522(d)(3) |
| Line from Schedule A/B: 7 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief 42 inch tv description: | \$ <u>75.00</u> | X \$ 75.00 | 11 USC § 522(d)(3) |
| Line from Schedule A/B: 7 | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief couch description: | \$50.00 | X \$ 50.00 | 11 USC § 522(d)(3) |
| Line from Schedule A/B: 6 | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief 2 queen beds | \$80.00 | № \$ 80.00 | 11 USC § 522(d)(3) |
| description: Line from Schedule A/B: 6 | | | |
| Brief 2 dressers description: | \$63.00 | X \$ 63.00 | 11 USC § 522(d)(3) |
| Line from Schedule A/B: 6 | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief 2 accent chairs description: | \$60.00 | X \$ 60.00 | 11 USC § 522(d)(3) |
| Line from Schedule A/B: 6 | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief blender | \$ 5.00 | X \$ 5.00 | 11 USC § 522(d)(3) |
| description: Line from Schedule A/B: 6 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief crockpot description: | \$ <u>10.00</u> | X \$ 10.00 | 11 USC § 522(d)(3) |
| Line from Schedule A/B: 6 | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | \$ | \$ | |
| Line from Schedule A/B: | | 100% of fair market value, up to any applicable statutory limit | |

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| Fill in this in | nformation to ic | lentify your case: | | |
|---------------------------------|------------------|------------------------------|-----------|--|
| Debtor 1 | Takara Nichele | e Jackson Middle Name | Last Name | |
| Debtor 2 (Spouse, if filing) |) First Name | Middle Name | Last Name | |
| United States | Bankruptcy Court | for the: Eastern District of | Гехаѕ | |
| Case number (If known) | | | | |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

☐ Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - M No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

| for each claim. If more than one creditor h | nore than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. habetical order according to the creditor's name. | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column Course Unsecure portion If any |
|--|---|---|---|---------------------------------------|
|] | Describe the property that secures the claim: | \$ | \$ | \$ |
| Creditor's Name | |] | | |
| Number Street | - | | | |
| Trained Circle | As of the date you file, the claim is: Check all that apply. | | | |
| | Contingent | | | |
| | ☐ Unliquidated | | | |
| City State ZIP Code | Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| Debtor 1 only | ☐ An agreement you made (such as mortgage or secured | | | |
| Debtor 2 only | car loan) | | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| At least one of the debtors and another | Judgment lien from a lawsuit | | | |
| 7 or 1 was 15 17 4 | Other (including a right to offset) | - | | |
| Check if this claim relates to a community debt | | | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| l l l l l l l l l l l l l l l l l l l | | | | |
| <u></u> | Describe the property that secures the claim: | \$ | \$ | \$ |
| Creditor's Name | |] | | |
| Newshar | - | | | |
| Number Street | | | | |
| | | | | |
| | As of the date you file, the claim is: Check all that apply. | | | |
| | Contingent | | | |
| City Chair 7ID Code | ☐ Contingent ☐ Unliquidated | | | |
| City State ZIP Code | Contingent | | | |
| City State ZIP Code Who owes the debt? Check one. | ☐ Contingent ☐ Unliquidated | | | |
| Who owes the debt? Check one. Debtor 1 only | Contingent Unliquidated Disputed | | | |
| Who owes the debt? Check one. | □ Contingent □ Unliquidated □ Disputed Nature of lien. Check all that apply. □ An agreement you made (such as mortgage or secured car loan) | | | |
| Who owes the debt? Check one. Debtor 1 only | □ Contingent □ Unliquidated □ Disputed Nature of lien. Check all that apply. □ An agreement you made (such as mortgage or secured car loan) □ Statutory lien (such as tax lien, mechanic's lien) | | | |
| Who owes the debt? Check one. Debtor 1 only Debtor 2 only | □ Contingent □ Unliquidated □ Disputed Nature of lien. Check all that apply. □ An agreement you made (such as mortgage or secured car loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit | | | |
| Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | □ Contingent □ Unliquidated □ Disputed Nature of lien. Check all that apply. □ An agreement you made (such as mortgage or secured car loan) □ Statutory lien (such as tax lien, mechanic's lien) | _ | | |
| Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | □ Contingent □ Unliquidated □ Disputed Nature of lien. Check all that apply. □ An agreement you made (such as mortgage or secured car loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit | - | | |
| Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a | □ Contingent □ Unliquidated □ Disputed Nature of lien. Check all that apply. □ An agreement you made (such as mortgage or secured car loan) □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit | - | | |

Case 19-40922 Doc 1 Filed 04/03/19 Entered 04/03/19 16:41:10 Fill in this information to identify your case: Debtor 1 Takara Nichele Debtor 2 (Spouse, if filing) First Name Middle Name United States Bankruptcy Court for the: Eastern District of Texas Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). **List All of Your PRIORITY Unsecured Claims** Part 1: 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim **Priority** Nonpriority amount amount 2.1 Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: ☐ Debtor 1 and Debtor 2 only Domestic support obligations ☐ At least one of the debtors and another ☐ Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated Is the claim subject to offset? Other. Specify ☐ No Yes 2.2 Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only ■ Domestic support obligations ☐ Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another ☐ Claims for death or personal injury while you were ☐ Check if this claim is for a community debt intoxicated

☐ No☐ Yes

Is the claim subject to offset?

Other, Specify

| Part 2: | List All of | Your NON | PRIORITY L | Jnsecured | Claims |
|---------|-------------|----------|------------|------------------|--------|

| Pa | rt 2: List All of Your NONPRIORITY Unsecured Claims | | |
|-----|---|---|----------------|
| | Do any creditors have nonpriority unsecured claims against you No. You have nothing to report in this part. Submit this form to the Yes | | |
| | List all of your nonpriority unsecured claims in the alphabetical opriority unsecured claim, list the creditor separately for each claim. Foincluded in Part 1. If more than one creditor holds a particular claim, lifill out the Continuation Page of Part 2. | r each claim listed, identify what type of claim it is. Do not list | claims already |
| | | | Total claim |
| 1 | | | Total Claim |
| l.1 | Ace Cash Express | Last 4 digits of account number 4 2 3 9 | \$1,800.00 |
| | Nonpriority Creditor's Name | When was the debt incurred? 11/17 | \$1,000.00 |
| | 18110 Midway | When was the debt incurred? 11/1/ | |
| | Number Street | | |
| | Dallas TX 75287 | As of the date you file, the claim is: Check all that apply. | |
| | City State ZIP Code | As of the date you me, the claim is. Oneck all that apply. | |
| | | ☐ Contingent | |
| | Who incurred the debt? Check one. | ☐ Unliquidated | |
| | Debtor 1 only | ☐ Disputed | |
| | Debtor 2 only | | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another | ☐ Student loans | |
| | ☐ Check if this claim is for a community debt | Obligations arising out of a separation agreement or divorce | |
| | • | that you did not report as priority claims | |
| | Is the claim subject to offset? | Debts to pension or profit-sharing plans, and other similar debts | |
| | X No ☐ Yes | Other. Specify | |
| | ☐ Yes | | |
| 1.2 | Association First Finance | Last 4 digits of account number 8 9 3 9 | \$1,300.00 |
| | American First Finance Nonpriority Creditor's Name | When was the debt incurred? 6/18 | |
| | | | |
| | 8585 N. Stemmons Fwy. | | |
| | Dallas TX 75247 | As of the date you file, the claim is: Check all that apply. | |
| | City State ZIP Code | ☐ Contingent | |
| | Who incurred the debt? Check one. | ☐ Unliquidated | |
| | | ☐ Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another | ☐ Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | ☐ Check if this claim is for a community debt | that you did not report as priority claims | |
| | Is the claim subject to offset? | Debts to pension or profit-sharing plans, and other similar debts | |
| | ¥ No | Other. Specify | |
| | ☐ Yes | | |
| 1.3 | | 4 7 0 0 | |
| | American Honda Finance Nonpriority Creditor's Name | Last 4 digits of account number 1 7 8 6 | \$11,000.00 |
| | • • | When was the debt incurred? 7/18 | |
| | 20800 Madrona Avenue Number Street | | |
| | Torrance CA 90503 | | |
| | City State ZIP Code | As of the date you file, the claim is: Check all that apply. | |
| | Who insured the debt 2 C | ☐ Contingent | |
| | Who incurred the debt? Check one. | ☐ Unliquidated | |
| | Debtor 1 only | ☐ Disputed | |
| | Debtor 2 only | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another | ☐ Student loans | |
| | ☐ Check if this claim is for a community debt | Obligations arising out of a separation agreement or divorce | |
| | Is the claim subject to offset? | that you did not report as priority claims | |
| | No | Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | Other. Specify | |
| | | | |

Part 2:

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| Your NONPRIORITY | Unsecured | Claims - | -Continuation | Page |
|------------------|-----------|----------|---------------|-------------|

| Afte | er listing any entries on this page, number them beginning wit | th 4.5, followed by 4.6, and so forth. | Total claim |
|------|--|---|------------------|
| 4.4 | Better Cash | Last 4 digits of account number 2 1 6 3 | \$1,100.00 |
| | Nonpriority Creditor's Name 8610 S. Sandy Parkway | When was the debt incurred? 8/18 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | <u>Sandy</u> UT 84070 | <u> </u> | |
| | City State ZIP Code Who incurred the debt? Check one. | ☐ Contingent ☐ Unliquidated | |
| | Debtor 1 only | ☐ Disputed | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | |
| | At least one of the debtors and another | Student loansObligations arising out of a separation agreement or divorce that | |
| | ☐ Check if this claim is for a community debt | you did not report as priority claims | |
| | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify | |
| | XI No □ Yes | | |
| 4.5 | One that One | Last 4 digits of account number 1 3 3 3 | \$62,500.00 |
| | Capital One Nonpriority Creditor's Name | | Ψ, |
| | 1680 Capital One Drive | When was the debt incurred? 7/18 | |
| | Number Street | As of the date you file the plains in Obselve II that are he | |
| | McLean VA 22102 | As of the date you file, the claim is: Check all that apply. | |
| | City State ZIP Code | Contingent | |
| | Who incurred the debt? Check one. | Unliquidated | |
| | Debtor 1 only | ☐ Disputed | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | |
| | At least one of the debtors and another | Student loans | |
| | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify | |
| | XI No □ Yes | | |
| 4.6 | Centerpoint Apartments | Last 4 digits of account number 4 3 0 8 | \$ <u>989.00</u> |
| | Nonpriority Creditor's Name | When was the debt incurred? 6/18 | |
| | 2626 Frankford Road Number Street | when was the dept incurred: | |
| | Dallas TX 75287 | As of the date you file, the claim is: Check all that apply. | |
| | City State ZIP Code | Contingent | |
| | | ☐ Unliquidated | |
| | Who incurred the debt? Check one. | ☐ Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | ☐ Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that | |
| | ☐ Check if this claim is for a community debt | you did not report as priority claims | |
| | Is the claim subject to offset? | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| | X No | Unier. Specify | |
| | ☐ Yes | | |
| | — 165 | | |

Part 2:

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| Your | NONPRIORITY | Unsecured | Claims - | -Continuation | Page |
|------|--------------------|-----------|----------|---------------|-------------|

| Afte | r listing any entries on this page, number them beginning with 4. | 5, followed by 4.6, and so forth. | Total claim |
|------|--|---|--------------------|
| 4.7 | Chase Bank Nonpriority Creditor's Name | Last 4 digits of account number 5 1 2 1 | \$ <u>1,150.00</u> |
| | 270 Park Avenue | When was the debt incurred? 10/18 | |
| | Number Street New York NY 10017 | As of the date you file, the claim is: Check all that apply. | |
| | City State ZIP Code | ☐ Contingent ☐ Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | Student loans | |
| | _ | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify | |
| | ™ No | , , | |
| | Yes | | |
| 4.8 | Commonwealth Edison | Last 4 digits of account number 1 9 3 6 | \$250.00 |
| | Nonpriority Creditor's Name | 4147 | |
| | PO Box 805379 | When was the debt incurred? $\frac{4/17}{}$ | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | Chicago IL 60680 | <u>_</u> | |
| | City State ZIP Code | ☐ Contingent | |
| | Who incurred the debt? Check one. | ☐ Unliquidated ☐ Disputed | |
| | Debtor 1 only | ■ Disputed | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | ☐ Student loans | |
| | At least one of the debtors and another | ☐ Obligations arising out of a separation agreement or divorce that | |
| | ☐ Check if this claim is for a community debt | you did not report as priority claims | |
| | • | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify | |
| | ☑ No □ Yes | | |
| 4.9 | Conno | Last 4 digits of account number 1 3 7 8 | \$ <u>1,700.00</u> |
| | Conns Nonpriority Creditor's Name | - | |
| | 2445 Technology Forest Blvd. Number Street | When was the debt incurred? $6/18$ | |
| | The Woodlands TX 77381 | As of the date you file, the claim is: Check all that apply. | |
| | City State ZIP Code | ☐ Contingent | |
| | Who incorred the debt? Obselves | Unliquidated | |
| | Who incurred the debt? Check one. | ☐ Disputed | |
| | Debtor 1 only | Type of NONDRIORITY unacquired electric | |
| | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | ☐ At least one of the debtors and another | Student loans | |
| | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | ★ Other. Specify | |
| | No No | | |
| | ☐ Yes | | |

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Part 2: Your NONPRIORITY Unsecured Claims —Continuation Page

| Afte | r listing any entries on this page, number them beginning with 4. | 5, followed by 4.6, and so forth. | Total claim |
|------|---|---|----------------------|
| 4.10 | Credit One Nonpriority Creditor's Name | Last 4 digits of account number 5 1 2 7 | \$600.00 |
| | 6801 S. Cimarron Road | When was the debt incurred? 7/18 | |
| | Number Street Las Vegas NV 89113 | As of the date you file, the claim is: Check all that apply. | |
| | City State ZIP Code | ☐ Contingent ☐ Unliquidated | |
| | Who incurred the debt? Check one. | ☐ Disputed | |
| | ■ Debtor 1 only □ Debtor 2 only | Type of NONDDIODITY upgequeed claim: | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | ☐ At least one of the debtors and another | Student loansObligations arising out of a separation agreement or divorce that | |
| | ☐ Check if this claim is for a community debt | you did not report as priority claims | |
| | Is the claim subject to offset? | Debts to pension or profit-sharing plans, and other similar debts Other. Specify | |
| | ■ No | - Other. Specify | |
| | ☐ Yes | | |
| 4.11 | Eingorbut | Last 4 digits of account number 3 9 4 7 | _{\$} 450.00 |
| | Fingerhut Nonpriority Creditor's Name | 6/40 | V |
| | 6509 Flying Clud | When was the debt incurred? 6/18 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | Eden Prairie MN 55344 City State ZIP Code | ☐ Contingent | |
| | | ☐ Unliquidated | |
| | Who incurred the debt? Check one. | ☐ Disputed | |
| | ☑ Debtor 1 only☑ Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that | |
| | ☐ Check if this claim is for a community debt | you did not report as priority claims | |
| | Is the claim subject to offset? | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| | XI No | Cities. Opening | |
| | ☐ Yes | | |
| 4.12 | Friendly Finance | Last 4 digits of account number 0 3 1 5 | \$9,000.00 |
| | Nonpriority Creditor's Name | 40/0040 | |
| | 6430 Security Blvd Number Street | When was the debt incurred? 10/2010 | |
| | Baltimore MD 21207 | As of the date you file, the claim is: Check all that apply. | |
| | City State ZIP Code | ☐ Contingent | |
| | Who incurred the debt? Check one. | ☐ Unliquidated ☐ Disputed | |
| | 🔀 Debtor 1 only | - Disputed | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | ☐ At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | ★ Other. Specify | |
| | Yes | | |

Part 2:

Your NONPRIORITY Unsecured Claims —Continuation Page

| Afte | r listing any entries on this page, number them beginning with | 4.5, followed by 4.6, and so forth. | Total claim |
|------|--|---|--------------------|
| 1.13 | Frontier Communications | Last 4 digits of account number 4 1 3 7 | \$ <u>450.00</u> |
| | Nonpriority Creditor's Name 401 Merritt 7 | When was the debt incurred? 10/18 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | Norwalk CT 06851 City State ZIP Code | Contingent Unliquidated | |
| | Who incurred the debt? Check one. | ☐ Disputed | |
| | ■ Debtor 1 only □ Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | ☐ Student loans | |
| | ☐ At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? XI No | X Other. Specify | |
| | Yes | | |
| .14 | Lane Bryant | Last 4 digits of account number 4 2 1 6 | \$525.00 |
| | Nonpriority Creditor's Name | When was the debt incurred? 8/18 | |
| | One Righter Bank Number Street | As of the date you file the eleim in Check all that each | |
| | Wilmington DE 19803 City State ZIP Code | As of the date you file, the claim is: Check all that apply. | |
| | City State ZIP Code | ☐ Contingent☐ Unliquidated | |
| | Who incurred the debt? Check one. | ☐ Disputed | |
| | ☑ Debtor 1 only☑ Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | ☐ Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that | |
| | ☐ Check if this claim is for a community debt | you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | XI Other. Specify | |
| | ☑ No □ Yes | | |
| .15 | Moneylion | Last 4 digits of account number 1 2 4 6 | \$ <u>1,100.00</u> |
| | Nonpriority Creditor's Name 30 W. 21st St. Floor 9 | When was the debt incurred? 8/18 | |
| | Number Street New York NY 10010 | As of the date you file, the claim is: Check all that apply. | |
| | City State ZIP Code | ☐ Contingent | |
| | Who incurred the debt? Check one. | ☐ Unliquidated☐ Disputed | |
| | 🔀 Debtor 1 only | — Бюритей | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | ☐ Student loans | |
| | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | X Other. Specify | |
| | Yes | | |

Part 2:

Your NONPRIORITY Unsecured Claims —Continuation Page

| Afte | r listing any entries on this page, number them beginning with 4 | .5, followed by 4.6, and so forth. | Total claim |
|------|--|---|--------------------|
| 4.16 | Overland Bond | Last 4 digits of account number 2 3 4 8 | \$12,000.00 |
| | Nonpriority Creditor's Name 4701 Fullerton | When was the debt incurred? 10/16 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | Chicago IL 60639 City State ZIP Code | Contingent | |
| | Who incurred the debt? Check one. | ☐ Unliquidated☐ Disputed | |
| | ■ Debtor 1 only Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | ☐ Student loans | |
| | ☐ At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | M Other. Specify | |
| | X No ☐ Yes | | |
| 4.17 | Paralala Car | Last 4 digits of account number 1 4 2 0 | \$250.00 |
| | People's Gas Nonpriority Creditor's Name | | Ψ |
| | 200 E. Randolph | When was the debt incurred? 4/17 | |
| | Number Street Chicago IL 60601 | As of the date you file, the claim is: Check all that apply. | |
| | City State ZIP Code | ☐ Contingent | |
| | Who incurred the debt? Check one. | Unliquidated | |
| | Debtor 1 only | ☐ Disputed | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that | |
| | ☐ Check if this claim is for a community debt | you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify | |
| | XI No | | |
| | ☐ Yes | | |
| 4.18 | Progressive Leasing | Last 4 digits of account number 6 5 3 9 | \$ <u>1,100.00</u> |
| | Nonpriority Creditor's Name | 6/19 | |
| | 5651 W. Talavi Blvd. Number Street | When was the debt incurred? 6/18 | |
| | Glendale AZ 85306 | As of the date you file, the claim is: Check all that apply. | |
| | City State ZIP Code | Contingent | |
| | Who incurred the debt? Check one. | ☐ Unliquidated ☐ Disputed | |
| | Debtor 1 only | D isputed | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | ☐ Student loans | |
| | ☐ At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify | |
| | X No □ Voc | | |
| | Yes | | _ |

Your NONPRIORITY Unsecured Claims —Continuation Page

| Afte | r listing any entries on this page, number them beginning wit | h 4.5, followed by 4.6, and so forth. | Total claim |
|------|---|---|--------------------|
| 4.19 | RBFCU Nonpriority Creditor's Name | Last 4 digits of account number 1 1 6 3 | \$ <u>582.00</u> |
| | PO Box 2097 Number Street | When was the debt incurred? 12/18 | |
| | Universal City TX 78148 | As of the date you file, the claim is: Check all that apply. | |
| | City State ZIP Code Who incurred the debt? Check one. | ☐ Contingent ☐ Unliquidated ☐ Disputed | |
| | Debtor 1 only Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | Debts to pension or profit-sharing plans, and other similar debts Other. Specify | |
| | X No ☐ Yes | Other. Specify | |
| 4.20 | Spectrum | Last 4 digits of account number 2 6 2 1 | \$ <u>850.00</u> |
| | Nonpriority Creditor's Name 400 Atlantic St. | When was the debt incurred? 6/18 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | Stamford CT 06901 City State ZIP Code | ☐ Contingent | |
| | Who incurred the debt? Check one. | ☐ Unliquidated ☐ Disputed | |
| | 🚨 Debtor 1 only | · | |
| | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: Student loans | |
| | ☐ At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that | |
| | ☐ Check if this claim is for a community debt | you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? No | Other. Specify | |
| 4.21 | ☐ Yes | Last 4 digits of account number <u>1</u> <u>7</u> <u>8</u> <u>6</u> | \$ <u>3,000.00</u> |
| | Speedy Cash Loans Nonpriority Creditor's Name | | |
| | | When was the debt incurred? 9/17 | |
| | Number Street Garland TX 75042 | As of the date you file, the claim is: Check all that apply. | |
| | City State ZIP Code | Contingent | |
| | Who incurred the debt? Check one. | ☐ Unliquidated☐ Disputed | |
| | Debtor 1 only | Type of NONDBIODITY upgestived alakes | |
| | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: Student loans | |
| | ☐ At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that | |
| | ☐ Check if this claim is for a community debt | you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? X № Yes | Other. Specify | |

Your NONPRIORITY Unsecured Claims —Continuation Page Part 2:

| Afte | er listing any entries on this page, number them beginning with 4. | .5, followed by 4.6, and so forth. | Total claim |
|------|--|---|--------------------|
| 4.22 | Texas Health | Last 4 digits of account number 1 7 8 6 | \$3,000.00 |
| | Nonpriority Creditor's Name 6200 W. Parker Road | When was the debt incurred? 7/18 | |
| | Number Street Plano TX 75093 | As of the date you file, the claim is: Check all that apply. | |
| | Plano TX 75093 City State ZIP Code | ☐ Contingent | |
| | Who incurred the debt? Check one. | ☐ Unliquidated☐ Disputed | |
| | ■ Debtor 1 only □ Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | ☐ Student loans | |
| | At least one of the debtors and another | ☐ Obligations arising out of a separation agreement or divorce that | |
| | ☐ Check if this claim is for a community debt | you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | ☑ Other. Specify | |
| | X No □ Yes | | |
| 4.23 | Texas Health | Last 4 digits of account number 1 7 8 6 | \$ <u>2,000.00</u> |
| | Nonpriority Creditor's Name | When was the debt incurred? 7/18 | |
| | 4535 Frankford Road Number Street | | |
| | Dallas TX 75287 | As of the date you file, the claim is: Check all that apply. | |
| | City State ZIP Code | ☐ Contingent | |
| | Who incurred the debt? Check one. | ☐ Unliquidated ☐ Disputed | |
| | 🚨 Debtor 1 only | _ Disputed | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another | ☐ Student loans | |
| | ☐ Check if this claim is for a community debt | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | · | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | ■ Other. Specify | |
| | Yes | | |
| 4.24 | | Last 4 digits of account number | \$ |
| | Nonpriority Creditor's Name | When was the debt incurred? | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | City State ZIP Code | ☐ Contingent | |
| | Who incurred the debt? Check one. | ☐ Unliquidated ☐ Disputed | |
| | ☐ Debtor 1 only | ■ Disputed | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another | Student loans | |
| | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify | |
| | □ No □ Yes | | |

Part 4:

Add the Amounts for Each Type of Unsecured Claim

| | amounts of certain types of unsecured claims. This informat mounts for each type of unsecured claim. | ation i | s for statistical reporting purpos | ses only. 28 U.S.C. |
|--------------|---|---------|------------------------------------|---------------------|
| | | | Total claim | |
| Total claims | 6a. Domestic support obligations | 6a. | \$ | |
| from Part 1 | 6b. Taxes and certain other debts you owe the government | 6b. | \$ | |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$ | |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | +\$ | |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$ |] |
| | | | Total claim | |
| Total claims | 6f. Student loans | 6f. | \$ <u>0.00</u> | |
| from Part 2 | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | <u>\$0.00</u> | |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ <u>0.00</u> | |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | + \$113,507.00 | |
| | | | | ٦ |

\$113,507.00

6j. Total. Add lines 6f through 6i.

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| Fill in this information to identify your case: | | | | |
|---|-----------------------------|----------------------------|-----------|--|
| Debtor | btor Takara Nichele Jackson | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse If filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court for | r the: Eastern District of | Texas | |
| Case number (If known) | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person o | r company with w | hom you | have the contract or lease | State what the contract or lease is for |
|-----|----------|------------------|---------|----------------------------|---|
| 2.1 | Frankfor | d Flats | | | Apartment Lease |
| | Name | | | | |
| | 2601 Fra | nkford Road | | | |
| | Number | Street | | | |
| | Dallas T | exas 75287 | | | |
| | City | | State | ZIP Code | |
| 2.2 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.4 | o.i.y | | Ciaio | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.5 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |

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| Fill in this | s information to ide | ntify your case: | | |
|-----------------|------------------------|----------------------------|-----------|--------------------|
| Debtor 1 | Takara Nichele | Jackson Middle Name | Last Name | _ |
| Debtor 2 | | | | |
| (Spouse, if fil | ling) First Name | Middle Name | Last Name | |
| United Stat | es Bankruptcy Court fo | r the: Eastern District of | Texas | |
| Case numb | per | | | ☐ Check if this is |
| | | | | amended filing |
| Ott: -: - i | I Campa 4001 | | | |

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| | Do you hav ☑ No ☐ Yes | ve any codebtors? (| If you are filing a joint case, do no | t list either spouse as | a codebtor.) | | | | | |
|-----|---|---|---|-------------------------|---|--|--|--|--|--|
| 2. | Within the Arizona, Ca | alifornia, Idaho, Louis | ou lived in a community propersiana, Nevada, New Mexico, Puer | | (Community property states and territories include ington, and Wisconsin.) | | | | | |
| | ☑ No. Go to line 3. ☑ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? ☑ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? | | | | | | | | | |
| | ☑ No ☐ Yes | s. In which community | y state or territory did you live? | | Fill in the name and current address of that person. | | | | | |
| | Nar | me of your spouse, former s | pouse, or legal equivalent | | | | | | | |
| | Nur | mber Street | | | | | | | | |
| | City | / | State | ZIP Code | | | | | | |
| | Schedule I Schedule I | D (Official Form 106 E/F, or Schedule G1 | , | • | Make sure you have listed the creditor on e G (Official Form 106G). Use <i>Schedule D</i> , | | | | | |
| | Column 1 | : Your codebtor | | | Column 2: The creditor to whom you owe the debt Check all schedules that apply: | | | | | |
| 3.1 |] | | | | Check all schedules that apply. | | | | | |
| 3.1 | Name | | | | Schedule D, line | | | | | |
| | Name | | | | ☐ Schedule E/F, line | | | | | |
| | Number | Street | | | ☐ Schedule G, line | | | | | |
| | City | | State | ZIP Code | | | | | | |
| 3.2 | | | | | Schedule D, line | | | | | |
| | Name | | | | Schedule E/F, line | | | | | |
| | Number | Street | | | Schedule G, line | | | | | |
| | City | | State | ZIP Code | | | | | | |
| 3.3 | O.I.J | | Ciuio | 2.1. 0000 | | | | | | |
| | Name | | | | Schedule D, line | | | | | |
| | | | | | Schedule E/F, line | | | | | |
| | Number | Street | | | ☐ Schedule G, line | | | | | |
| | City | | State | ZIP Code | _ | | | | | |

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| Debtor 1 Takara Nichele Jacks First Name Debtor 2 | | | | |
|---|--------------------|------------------------------------|------------------|-------------------------------------|
| | son | | | |
| Lightor 2 | Middle Name | Last Name | | |
| (Spouse, if filing) First Name | Middle Name | Last Name | | |
| United States Bankruptcy Court for the: | Eastern District | of Texas | | |
| Case number | | | Check if this | o io: |
| (If known) | | | An ame | |
| | | | | ement showing post-petition |
| | | | | 13 income as of the following date: |
| Official Form 106I | | | MM / DD | / YYYY |
| Schedule I: Your | Income | | | 12/15 |
| | | | | 12/13 |
| Part 1: Describe Employme | | s, write your name and cas | se number (if kn | own). Answer every question. |
| Fill in your employment information. | | Debtor 1 | | Debtor 2 or non-filing spouse |
| If you have more than one job, | | | | |
| attach a separate page with information about additional | Employment status | XI Employed | | ☐ Employed |
| employers. | | ■ Not employed | | ■ Not employed |
| Include part-time, seasonal, or | | | | |
| self-employed work. | Occupation | Document Managemer | nt Specialist | |
| Occupation may Include student or homemaker, if it applies. | · | | | |
| 1 | Employer's name | World Link | | |
| | | | | |
| ' | Employer's address | 3880 Parkwood Boulev Number Street | ard | Number Street |
| | | Number Street | | Number Street |
| | | | | |
| | | | | |
| | | | | |
| | | Frisco, TX 75034 | | |
| | | | ZIP Code | City State ZIP Code |

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

3. +\$<u>0.00</u>

\$4,120.48

+ \$0.00

\$0.00

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Debtor 1 Takara Nichele Jackson

First Name Middle Name

Last Name

Case number (if known)____

| | | For Debtor 1 | | For Debtor 2 or non-filing spouse | i | |
|---|-----------|---------------------|-------|-----------------------------------|-----|--------------------|
| Copy line 4 here | 4. | \$ <u>4,120.48</u> | - | \$ <u>0.00</u> | | |
| 5. List all payroll deductions: | | | | | | |
| 5a. Tax, Medicare, and Social Security deductions | 5a. | \$312.06 | | \$0.00 | | |
| 5b. Mandatory contributions for retirement plans | 5b. | \$0.00 | _ | \$0.00 | | |
| 5c. Voluntary contributions for retirement plans | 5c. | \$ <u>112.58</u> | _ | \$0.00 | | |
| | | \$0.00 | _ | \$0.00 \$0.00 | | |
| 5d. Required repayments of retirement fund loans | 5d. | , | _ | | | |
| 5e. Insurance | 5e. | \$ <u>73.25</u> | _ | \$0.00 | | |
| 5f. Domestic support obligations | 5f. | \$0.00 | _ | \$0.00 | | |
| 5g. Union dues | 5g. | \$ <u>0.00</u> | _ | \$ <u>0.00</u> | | |
| 5h. Other deductions. Specify: See Attachment 1 | 5h. | +\$362.67 | _ | + \$0.00 | | |
| 6. Add the payroll deductions . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. | 6. | \$ <u>860.56</u> | _ | \$ <u>0.00</u> | | |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ <u>3,259.92</u> | _ | \$ <u>0.00</u> | | |
| 8. List all other income regularly received: | | | | | | |
| 8a. Net income from rental property and from operating a business, profession, or farm | | | | | | |
| Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ <u>0.00</u> | _ | \$ <u>0.00</u> | | |
| 8b. Interest and dividends | 8b. | \$0.00 | | \$0.00 | | |
| 8c. Family support payments that you, a non-filing spouse, or a depende regularly receive | nt | T | _ | | | |
| Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$ <u>0.00</u> | _ | \$ <u>0.00</u> | | |
| 8d. Unemployment compensation | 8d. | \$ 0.00 | _ | \$ <u>0.00</u> | | |
| 8e. Social Security | 8e. | \$ 0.00 | _ | \$ <u>0.00</u> | | |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistan that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | ce 8f. | \$ | _ | \$ <mark>0.00</mark> | | |
| | οι. | | | | | |
| 8g. Pension or retirement income | 8g. | \$ <u>0.00</u> | _ | \$ <u>0.00</u> | | |
| 8h. Other monthly income. Specify: | 8h. | +\$0.00 | | + \$0.00 | _ | |
| 9. Add all other income . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. | 9. | \$ <u>0.00</u> | | \$ <u>0.00</u> |] | |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | \$ <u>3,259.92</u> | . + | \$ <u>0.00</u> | = | \$ <u>3,259.92</u> |
| 11. State all other regular contributions to the expenses that you list in <i>Sched</i> Include contributions from an unmarried partner, members of your household, y friends or relatives. | our d | ependents, your re | | | | |
| Do not include any amounts already included in lines 2-10 or amounts that are | | vailable to pay exp | enses | | _ | an nn |
| Specify: | | | | 11 | . + | \$0.00 |
| 12. Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain S | | | | • | | \$ <u>3,259.92</u> |
| | | | | | | Combined |
| 13. Do you expect an increase or decrease within the year after you file this f | orm? | • | | | | monthly income |
| ☐ Yes. Explain: | | | | | | |

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Attachment Debtor: Takara Nichele Jackson Case No:

Attachment 1

Accident insurance, Disability insurance, Garnishment, and Life insurance

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| | Fill in this information to identify | your case: | | | | |
|----------------|---|---|---|---|--|---|
| C S Be int (if | Debtor 1 Takara Nichele Jack First Name Debtor 2 Spouse, if filing) First Name United States Bankruptcy Court for the: (If known) Defficial Form 106J Chedule J: You as complete and accurate as po | Middle Name Last Name Middle Name Last Name Eastern District of Texas Last Name Eastern District of Texas Last Name Eastern District of Texas Last Name Eastern District of Texas | expenses MM / DD / | ded filir nent sh as of t YYYY | e for supplyin | 12/15 ng correct |
| 1. | Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a No Yes. Debtor 2 must fi | separate household? le Official Forms 106J-2, Expenses for | Separate Household of Debtor 2. | | | |
| 2. | Do you have dependents? Do not list Debtor 1 and Debtor 2. Do not state the dependents' names. | No Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | - | Dependent's age | Does dependent live with you? No Yes |
| P | | ☑ No ☐ Yes ing Monthly Expenses r bankruptcy filing date unless you a | re using this form as a supplem | ent in a | ı Chapter 13 c | ase to report |
| a Ir s | pplicable date. nclude expenses paid for with no uch assistance and have include | | ı know the value of cial Form B 106l.) | 4. 4a. 4b. 4c. | Your expense \$\frac{1}{3},195.00 \$\frac{0}{9}.00 \$\frac{0}{3}0.00 | |

4d. Homeowner's association or condominium dues

\$0.00

4d.

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Takara Nichele Jackson
First Name Middle Name Debtor 1

Last Name

Case number (if known)_

| | | | Your expenses |
|-----|--|------|------------------|
| | | | \$0.00 |
| 5. | . Additional mortgage payments for your residence, such as home equity loans | 5. | 4 |
| 6 | Utilities: | | |
| | 6a. Electricity, heat, natural gas | 6a. | \$ <u>167.00</u> |
| | 6b. Water, sewer, garbage collection | 6b. | \$ <u>54.00</u> |
| | 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ <u>250.00</u> |
| | 6d. Other. Specify: | 6d. | \$ <u>0.00</u> |
| 7 | Food and housekeeping supplies | 7. | \$ <u>625.00</u> |
| 8. | Childcare and children's education costs | 8. | \$ <u>100.00</u> |
| 9. | Clothing, laundry, and dry cleaning | 9. | \$ <u>150.00</u> |
| 10. | Personal care products and services | 10. | \$80.00 |
| 11. | Medical and dental expenses | 11. | \$ <u>0.00</u> |
| 12. | Transportation. Include gas, maintenance, bus or train fare. | | \$350.00 |
| | Do not include car payments. | 12. | Ψ <u>σσσισσ</u> |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ <u>0.00</u> |
| 14. | Charitable contributions and religious donations | 14. | \$ <u>0.00</u> |
| 15. | Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| | 15a. Life insurance | 15a. | \$ 0.00 |
| | 15b. Health insurance | 15b. | \$ <u>0.00</u> |
| | 15c. Vehicle insurance | 15c. | \$ <u>0.00</u> |
| | 15d. Other insurance. Specify: | 15d. | \$ <u>0.00</u> |
| 16. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: | 16. | \$ <u>0.00</u> |
| 17. | Installment or lease payments: | | |
| | 17a. Car payments for Vehicle 1 | 17a. | \$ <u>0.00</u> |
| | 17b. Car payments for Vehicle 2 | 17b. | \$ <u>0.00</u> |
| | 17c. Other. Specify: | 17c. | \$ |
| | 17d. Other. Specify: | 17d. | \$ |
| 18. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I). | 18. | -0.00 |
| | you. pay on mic o, concease i, roas moome (omotal roint 1991). | 10. | \$ <u>0.00</u> |
| 19. | Other payments you make to support others who do not live with you. | | |
| | Specify: | 19. | \$ <u>0.00</u> |
| 20. | Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom | ne. | |
| | 20a. Mortgages on other property | 20a. | \$ <u>0.00</u> |
| | 20b. Real estate taxes | 20b. | \$ <u>0.00</u> |
| | 20c. Property, homeowner's, or renter's insurance | 20c. | \$ <u>0.00</u> |
| | 20d. Maintenance, repair, and upkeep expenses | 20d. | \$ <u>0.00</u> |
| | 20e. Homeowner's association or condominium dues | 20e. | \$0.00 |

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| Debtor 1 | Takara N First Name | ichele Jackson Middle Name | Last Name | Case number (if kno | own) | |
|-------------------|--|---|---|---------------------------|------|--------------------------------|
| 21. Oth | er . Specify: | | | | 21. | +\$0.00 |
| 22a. 22b. | Add lines 4 thr Copy line 22 (r | monthly expenses | for Debtor 2), if any, from Official t is your monthly expenses. | Form 106J-2 | 22. | \$2,971.00 \$ \$2,971.00 |
| 23. Calc ι | ulate your mon | thly net income | | | | |
| 23a. | Copy line 12 (| your combined m | onthly income) from Schedule I. | | 23a. | \$3,259.92 |
| 23b. | Copy your mo | nthly expenses fr | om line 22 above. | | 23b. | - \$2,971.00 |
| 23c. | - | monthly expense our <i>monthly net i</i> | s from your monthly income. | | 23c. | \$ <u>288.92</u> |
| For e | example, do you gage payment to o. | expect to finish poincrease or dec | ease in your expenses within the paying for your car loan within the yease because of a modification to | ear or do you expect your | | |
| | | | | | | |

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| Fill in this in | formation to ide | ntify your case: | |
|---------------------------------|----------------------|--------------------------|----------------------|
| Debtor 1 | Takara First Name | Nichele Middle Name | Jackson Last Name |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States I | Bankruptcy Court for | the: Eastern District of | Гехаѕ |
| Case number | (If known) | | |

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | Your assets Value of what you own |
|--|--------------------------------------|
| Schedule A/B: Property (Official Form 106A/B) | \$ 0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$ <u>1,183.00</u> |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$ <u>1,183.00</u> |
| art 2: Summarize Your Liabilities | |
| | |
| | Your liabilities Amount you owe |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$0.00 |
| Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ 0.00 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | + \$ <u>116,696.00</u> |
| Your total liabilities | \$ <u>116,696.00</u> |
| Part 3: Summarize Your Income and Expenses | |
| . Schedule I: Your Income (Official Form 106I) | * 2 250 02 |
| Copy your combined monthly income from line 12 of Schedule I | \$ <u>3,259.92</u> |
| . Schedule J: Your Expenses (Official Form 106J) | |

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Debtor 1

Takara Nichele Jackson Case number (if known)

| Pá | art 4: Answer These Questions for Administrative and Statistical Records | | |
|----|---|----------------------------------|------------|
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form. Yes | orm to the court with your other | schedules. |
| 7. | What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purpose. Your debts are not primarily consumer debts. You have nothing to report on this part this form to the court with your other schedules. | ses. 28 U.S.C. § 159. | |
| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | come from Official | \$4,120.48 |
| 9. | Copy the following special categories of claims from Part 4, line 6 of <i>Schedule E/F</i> : | Total claim | |
| | From Part 4 on Schedule E/F, copy the following: | | |
| | 9a. Domestic support obligations (Copy line 6a.)9b. Taxes and certain other debts you owe the government. (Copy line 6b.)9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$0.00 \$0.00 | |
| | 9d. Student loans. (Copy line 6f.) 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | \$0.00 \$0.00 + \$0.00 | |
| | 9g. Total. Add lines 9a through 9f. | \$0.00 | |

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| Fill in this in | formation to i | dentify your case: | | |
|---------------------------------|-----------------|-------------------------------|-----------|--|
| Debtor 1 | Takara Niche | ele Jackson Middle Name | Last Name | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States | Bankruptcy Cour | t for the: Eastern District o | of Texas | |
| Case number (If known) | | | | |

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| No | |
|--|---|
| Yes. Name of person | . Attach Bankruptcy Petition Preparer's Notice, Declaration, and |
| | Signature (Official Form 119). |
| | |
| | |
| | |
| | |
| | |
| | |
| der penalty of periury. I declare that I hay | re read the summary and schedules filed with this declaration and |
| | re read the summary and schedules filed with this declaration and |
| | re read the summary and schedules filed with this declaration and |
| der penalty of perjury, I declare that I hav t they are true and correct. | re read the summary and schedules filed with this declaration and |
| | re read the summary and schedules filed with this declaration and |
| t they are true and correct. | |
| | re read the summary and schedules filed with this declaration and |

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| Fill in this in | nformation to identify | your case: | |
|--------------------------------|---------------------------|---------------------------|----------------------|
| Debtor 1 | Takara First Name | Nichele Middle Name | Jackson Last Name |
| Debtor 2 (Spouse, if filing | j) First Name | Middle Name | Last Name |
| United States | Bankruptcy Court for the: | Eastern District of Texas | S |
| Case number (If known) | | | |

☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| at is your current marital status Married Not married | s? | | | | |
|--|--------------|-------------------------------|---------------------------------|----------------|-------------------------------|
| ing the last 3 years, have you l No Yes. List all of the places you live | - | | | | |
| Debtor 1: | | Dates Debtor 1 lived there | Debtor 2: | | Dates Debtor 2 lived there |
| 2626 Frankfurt Road, Apt. 16 Number Street Dallas TX 75287 | 4308 | From 04/15/17 To 06/30/18 | Same as Debtor 1 Number Street | | Same as Debtor 1 From To |
| | ite ZIP Code | | City | State ZIP Code | |
| Number Street | | From To | Number Street | | Same as Debtor 1 From To |
| , | ate ZIP Code | nuse or legal equiv | City | State ZIP Code | Community property states |

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| From January 1 of current year until the date you filed for bankruptcy: For last calendar year: | ebtor 1 ources of income heck all that apply. Wages, commissions, bonuses, tips Operating a business Wages, commissions, | Gross income (before deductions and exclusions) \$11,425.25 | Debtor 2 Sources of income Check all that apply. | Gross income (before deductions and |
|---|---|--|--|--|
| From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2018 | ources of income heck all that apply. Wages, commissions, bonuses, tips Operating a business | (before deductions and exclusions) | Sources of income | |
| From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2018 | Mages, commissions, bonuses, tips Operating a business | (before deductions and exclusions) | | |
| the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2018 | bonuses, tips Operating a business | \$ <u>11,425.25</u> | | exclusions) |
| (January 1 to December 31, 2018) | Nagos sammississis | | Wages, commissions, bonuses, tipsOperating a business | \$ |
| | wages, commissions, bonuses, tips Operating a business | \$ <u>48,834.00</u> | ☐ Wages, commissions, bonuses, tips☐ Operating a business | \$ |
| For the calendar year before that: | Wages, commissions, bonuses, tipsOperating a business | \$43,216.00 | ☐ Wages, commissions, bonuses, tips☐ Operating a business | \$ |
| No Yes. Fill in the details. | | | | |
| D | ebtor 1 | | Debtor 2 | |
| | ources of income escribe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) |
| From January 1 of current year until | | \$ | | \$ |
| the date you filed for bankruptcy: | | \$ | | \$ |
| | | \$ | | \$ |
| For last calendar year: | | \$ | | \$ |
| (January 1 to December 31,) — | : | \$ | | \$ |
| | | \$ | | \$ |
| YYYY | | | | |
| For the calendar year before that: | | \$ | | \$ |

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Takara Nichele Jackson
First Name Middle Name Debtor 1 Case number (if known)_

Last Name

| Are eitl | her De | ebtor 1's or Debt | tor 2's deb | ts primarily co | onsumer debt | s? | | |
|-------------|--------|--------------------------------------|--------------------------------|-------------------------------------|----------------------------------|--|--|---|
| ☐ No. | | | | | | bts. Consumer debts are ousehold purpose." | e defined in 11 U.S.C. § 101(| 8) as |
| | Duri | ing the 90 days be | efore you fil | led for bankrup | tcy, did you pa | ay any creditor a total of | \$6,825* or more? | |
| | | No. Go to line 7. | | | | | | |
| | | total amount child suppor | t you paid that t and alimo | nat creditor. Do ny. Also, do no | not include pa t include paym | ayments for domestic su nents to an attorney for t | or more payments and the pport obligations, such as his bankruptcy case. fter the date of adjustment. | |
| 20 v | | | | - | | | nor the date of dajustment. | |
| A Yes | | otor 1 or Debtor 2 | | | | ots. By any creditor a total of | \$600 or more? | |
| | | , | eiore you iii | eu ioi bankiup | icy, ald you pa | ay arry creditor a total or | φουσ οι more : | |
| | X | No. Go to line 7. | | | | | | |
| | | creditor. Do | not include | payments for o | domestic supp | \$600 or more and the to ort obligations, such as by for this bankruptcy cas | | |
| | | | | | Dates of payment | Total amount paid | Amount you still owe | Was this payment for |
| | | | | | | \$ | _ \$ | ☐ Mortgage |
| | | Creditor's Name | | | | | | ☐ Car |
| | | Number Street | | | | | | Credit card |
| | | Number Street | | | | | | Loan repayment |
| | | | | | | | | ☐ Suppliers or vendo |
| | | City | State | ZIP Code | | | | ☐ Other |
| | | Oity | Otate | Zii Oode | | | | _ |
| | | | | | | \$ | \$ | ☐ Mortgage |
| | | Creditor's Name | | | | 7 | | ☐ Mortgage |
| | | Orcalior o Harrio | | | | | | □ Cal |
| | | | | | | | | Crodit cord |
| | | Number Street | | | | | | Credit card |
| | | | | | | | | Loan repayment |
| | | | | | | | | ☐ Loan repayment☐ Suppliers or vendo |
| | | | State | ZIP Code | | | | ☐ Loan repayment☐ Suppliers or vendo |
| | | Number Street City | State | ZIP Code | | \$ | | ☐ Loan repayment☐ Suppliers or vendo |
| | - | Number Street | State | ZIP Code | | \$ | \$ | Loan repayment Suppliers or vendo Other |
| | - | Number Street City Creditor's Name | State | ZIP Code | | \$ | \$ | □ Loan repayment □ Suppliers or vendo □ Other |
| | - | Number Street City | State | ZIP Code | | \$ | \$ | Loan repayment Suppliers or vendo Other Mortgage Car |
| | - | Number Street City Creditor's Name | State | ZIP Code | | \$ | \$ | Loan repayment Suppliers or vendo Other Mortgage Car Credit card |

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Case number (if known)_

Takara Nichele Jackson
First Name Middle Name

Last Name

Debtor 1

| siders include your relatives; any general rporations of which you are an officer, dent, including one for a business you op the child support and alimony. | al partners; rela lirector, person | tives of any g in control, or | eneral partners; pa owner of 20% or n | artnerships of which nore of their voting | securities; and any managing |
|---|---------------------------------------|----------------------------------|--|--|---|
| No | | | | | |
| Yes. List all payments to an insider. | | | | | |
| | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| Insider's Name | | | \$ | \$ | |
| Number Street | | | | | |
| City State | ZIP Code | | | | |
| | | | \$ | \$ | |
| Insider's Name | | | | | |
| Number Street | | | | | |
| | | | | | |
| City State | ZIP Code | | | | |
| City State thin 1 year before you filed for bankruinsider? clude payments on debts guaranteed or No Yes. List all payments that benefited a | uptcy, did you | | nyments or transf | er any property on | account of a debt that benefited |
| thin 1 year before you filed for bankruinsider? clude payments on debts guaranteed or | uptcy, did you | | Total amount | er any property on Amount you still owe | account of a debt that benefited Reason for this payment Include creditor's name |
| thin 1 year before you filed for bankruinsider? clude payments on debts guaranteed or | uptcy, did you | n insider. Dates of | Total amount | Amount you still | Reason for this payment |
| thin 1 year before you filed for bankruinsider? clude payments on debts guaranteed or No Yes. List all payments that benefited a | uptcy, did you | n insider. Dates of | Total amount paid | Amount you still owe | Reason for this payment |
| thin 1 year before you filed for bankruinsider? clude payments on debts guaranteed or No Yes. List all payments that benefited a | uptcy, did you | n insider. Dates of | Total amount paid | Amount you still owe | Reason for this payment |
| thin 1 year before you filed for bankruinsider? clude payments on debts guaranteed or No Yes. List all payments that benefited a | uptcy, did you cosigned by a | n insider. Dates of | Total amount paid | Amount you still owe | Reason for this payment |

City

ZIP Code

State

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Debtor 1 Takara Nichele Jackson
First Name Middle Name Last Name

Case number (if known)

Case number (if known)

| all such matters, including persona contract disputes. | l injury cases, s | small cla | aims actions, divo | orces, collection suits, paternit | y actions, support | t or custody modification |
|--|-------------------|-------------------------------|--|--|--------------------|---------------------------|
| No | | | | | | |
| Yes. Fill in the details. | | | | | | |
| | Nature | of the c | ase | Court or agency | | Status of the case |
| | | | | | | |
| Case title | | | | Court Name | | — Pending |
| | | | | | | On appeal |
| | | | | Number Street | | Concluded |
| Case number | | | | | | |
| | | | | City State | ZIP Code | |
| | | | | | | D. Dendina |
| Case title | | | | Court Name | | — Pending |
| | | | | | | On appeal |
| | | | | Number Street | | Concluded |
| Case number | | | | 016. | 710.0 | _ |
| | | | | City State | ZIP Code | |
| eck all that apply and fill in the detail No. Go to line 11. Yes. Fill in the information below. | is below. | Des | cribe the property | | Date | Value of the property |
| No. Go to line 11. | S DOIOW. | Garn | · - | k improperly, money was | Date | Value of the property |
| No. Go to line 11. Yes. Fill in the information below. Friendly finance | S DOIOW. | Garn | | | Date | Value of the property |
| No. Go to line 11. Yes. Fill in the information below. Friendly finance Creditor's Name | S Dolow. | Garn | ished pay chec | | Date | |
| No. Go to line 11. Yes. Fill in the information below. Friendly finance | S DOIOW. | Garn returi | ished pay chec | k improperly, money was | Date | |
| No. Go to line 11. Yes. Fill in the information below. Friendly finance Creditor's Name 6430 Security Blvd | S DOIOW. | Garn returi | ished pay check ned to me | k improperly, money was | Date | |
| No. Go to line 11. Yes. Fill in the information below. Friendly finance Creditor's Name 6430 Security Blvd | S DOIOW. | Garn returi | ished pay chec ned to me | k improperly, money was | Date | |
| No. Go to line 11. Yes. Fill in the information below. Friendly finance Creditor's Name 6430 Security Blvd Number Street | S DOIOW. | Garn return | ished pay checkned to me lain what happene | k improperly, money was d possessed. reclosed. | Date | |
| No. Go to line 11. Yes. Fill in the information below. Friendly finance Creditor's Name 6430 Security Blvd | | Garn return | ished pay checkned to me lain what happene Property was re Property was fo Property was ga | k improperly, money was d possessed. reclosed. | Date | |
| No. Go to line 11. Yes. Fill in the information below. Friendly finance Creditor's Name 6430 Security Blvd Number Street Baltimore MD 21207 | | Garn return | ished pay checkned to me lain what happene Property was re Property was fo Property was ga | k improperly, money was d possessed. reclosed. arnished. tached, seized, or levied. | Date | \$ |
| No. Go to line 11. Yes. Fill in the information below. Friendly finance Creditor's Name 6430 Security Blvd Number Street Baltimore MD 21207 | | Garn return | ished pay checkned to me lain what happene Property was re Property was fo Property was at | k improperly, money was d possessed. reclosed. arnished. tached, seized, or levied. | | \$ |
| No. Go to line 11. Yes. Fill in the information below. Friendly finance Creditor's Name 6430 Security Blvd Number Street Baltimore MD 21207 City State | | Garn return | ished pay checkned to me lain what happene Property was re Property was fo Property was gar Property was at | k improperly, money was d possessed. reclosed. arnished. tached, seized, or levied. | | \$ |
| No. Go to line 11. Yes. Fill in the information below. Friendly finance Creditor's Name 6430 Security Blvd Number Street Baltimore MD 21207 | | Garn return | ished pay checkned to me lain what happene Property was re Property was fo Property was gar Property was at | k improperly, money was d possessed. reclosed. arnished. tached, seized, or levied. | Date | \$Value of the property |
| No. Go to line 11. Yes. Fill in the information below. Friendly finance Creditor's Name 6430 Security Blvd Number Street Baltimore MD 21207 City State | | Garn return Expl Dess 2018 | ished pay checkned to me lain what happene Property was re Property was fo Property was at Property was at cribe the property | k improperly, money was d possessed. reclosed. arnished. tached, seized, or levied. | Date | \$Value of the property |
| No. Go to line 11. Yes. Fill in the information below. Friendly finance Creditor's Name 6430 Security Blvd Number Street Baltimore MD 21207 City State American Honda Creditor's Name | | Garn return Expl Desi 2018 | ished pay checoned to me lain what happene Property was re Property was fo Property was at Property was at Cribe the property Honda Civic | k improperly, money was d possessed. reclosed. arnished. tached, seized, or levied. | Date | \$Value of the property |
| No. Go to line 11. Yes. Fill in the information below. Friendly finance Creditor's Name 6430 Security Blvd Number Street Baltimore MD 21207 City State American Honda Creditor's Name | | Garn return Expl Desc 2018 | ished pay check ned to me lain what happened Property was re Property was at cribe the property Honda Civic lain what happened Property was re | k improperly, money was d possessed. reclosed. arnished. tached, seized, or levied. | Date | \$Value of the property |
| No. Go to line 11. Yes. Fill in the information below. Friendly finance Creditor's Name 6430 Security Blvd Number Street Baltimore MD 21207 City State American Honda Creditor's Name | | Garn return Expl Desi 2018 | ished pay checoned to me lain what happene Property was re Property was fo Property was at Property was at Cribe the property Honda Civic | k improperly, money was d possessed. reclosed. arnished. tached, seized, or levied. d possessed. reclosed. | Date | \$Value of the property |

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Case number (if known)_

Takara Nichele Jackson
First Name Middle Name

Last Name

Debtor 1

| counts or refuse to make a payment be | uptcy, did any creditor, including a bank or financia ecause you owed a debt? | ar mistration, set on any amo | unio nom you. |
|---|--|---------------------------------|-----------------|
| No | | | |
| Yes. Fill in the details. | | | |
| | Describe the action the creditor took | Date action was taken | Amount |
| Creditor's Name | _ | was taken | |
| | | 9 | . |
| Number Street | _ | ļ ¥ | , |
| | _ | | |
| City State ZIP Code | Last 4 digits of account number: XXXX | | |
| | | · | |
| | otcy, was any of your property in the possession of | f an assignee for the benefit o | of |
| reditors, a court-appointed receiver, a c | ustodian, or another official? | | |
| ☑ No ☑ Yes | | | |
| ■ 163 | | | |
| 5: List Certain Gifts and Contrib | utions | | |
| | | | |
| | ptcy, did you give any gifts with a total value of mo | ore than \$600 per person? | |
| No | | | |
| Yes. Fill in the details for each gift. | | | |
| Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave | Value |
| | | the gifts | |
| | | the gifts | |
| Person to Whom You Gave the Gift | _ | the gifts | \$ |
| Person to Whom You Gave the Gift | _ | the gifts | \$ |
| Person to Whom You Gave the Gift | _ | the gifts | \$ \$ |
| Person to Whom You Gave the Gift | _ | the gifts | \$ \$ |
| Person to Whom You Gave the Gift | _ | the gifts | \$ \$ |
| Person to Whom You Gave the Gift City State ZIP Code | | the gifts | \$ \$ |
| City State ZIP Code | | the gifts | \$ \$ |
| | | the gifts | \$\$ |
| City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 | Describe the gifts | Dates you gave | \$\$ \$Value |
| City State ZIP Code Person's relationship to you | Describe the gifts | | \$\$ Value |
| City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave | \$ |
| City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 | Describe the gifts | Dates you gave | |
| City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave | |
| City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave | \$ |
| City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave | \$ |
| City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave | \$ |
| City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave | \$ |

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| otor 1 | Takara Nichele Jackson First Name Middle Name Last N | Case number (# known)_ | | |
|----------|---|---|--------------------------------------|------------------------|
| | Filst Name wildlie Name Last i | valle | | |
| Withi | in 2 years before you filed for bankrunt | ccy, did you give any gifts or contributions with a total value | of more than \$600 | to any charity? |
| X | | soy, and you give any gine of contributions with a total value | | to any onanty. |
| | es. Fill in the details for each gift or contr | ibution. | | |
| | Gifts or contributions to charities | Describe what you contributed | Date you | Value |
| | that total more than \$600 | Describe what you contributed | contributed | value |
| | | | Ī | |
| - | | | | \$ |
| C | charity's Name | | | |
| - | | | | \$ |
| | | | | |
| _ | | | | |
| | | | | |
| c | ity State ZIP Code | | | |
| | | | | |
| rt 6: | List Certain Losses | | | |
| | | | | |
| | 'es. Fill in the details. Describe the property you lost and how the loss occurred | Describe any insurance coverage for the loss | Date of your loss | Value of property lost |
| | | Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. | | |
| | | | T | \$ |
| | | | | Ψ |
| | | | | |
| rt 7: | List Certain Payments or Trans | efers | | |
| With | in 1 year before you filed for bankrupto | cy, did you or anyone else acting on your behalf pay or trans | sfer any property to | anyone you |
| | sulted about seeking bankruptcy or pre | | | |
| | | parers, or credit counseling agencies for services required in yo | our bankruptcy. | |
| | lo 'es. Fill in the details. | | | |
| | cs. I iii iii the details. | B | D. | |
| | Michael B. Suffness PC | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| | Person Who Was Paid | | | |
| | 5201 W. Park Blvd., Ste. 100 Number Street | | 03/26/19 | \$ <u>750.00</u> |
| | | | | |
| | | | | \$ |
| | Plano TX 75093 City State ZIP Code | | | |
| | | | | |
| | msuff@aol.com Email or website address | | | |
| | Person Who Made the Payment, if Not You | | | |
| _ | made and raymoni, il Not 100 | | | |

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| | Description and value of any property to | ransferred | Date payment or transfer was made | Amount of payment |
|--|--|---|-----------------------------------|------------------------|
| | _ | | | |
| Person Who Was Paid | | | | \$ |
| Number Street | _ | | | · |
| Number Street | | | | \$ |
| | _ | | | Ψ |
| | | | | |
| City State ZIP Code | _ | | | |
| | | | | |
| Email or website address | | | | |
| Email of website address | | | | |
| Person Who Made the Payment, if Not You | | | | |
| | | | | |
| Do not include any payment or transfer that ☑ No ☐ Yes. Fill in the details. | you listed on line 16. | | | |
| | Description and value of any property to | ransferred | Date payment or transfer was made | Amount of paymo |
| | _ | | | |
| Person Who Was Paid | | | | \$ |
| | | | | Ψ |
| Number Street | _ | | | |
| Number Street | - | | | \$ |
| Number Street | - - | | | \$ |
| City State ZIP Code Nithin 2 years before you filed for bankru | | ransfer any property to | anyone, other than | \$n property |
| City State ZIP Code | r business or financial affairs? s made as security (such as the granting o | | ortgage on your prop | perty). |
| City State ZIP Code Within 2 years before you filed for bankru ransferred in the ordinary course of you nelude both outright transfers and transfers to not include gifts and transfers that you have No Yes. Fill in the details. | r business or financial affairs? s made as security (such as the granting o ave already listed on this statement. Description and value of property | f a security interest or m Describe any property | ortgage on your prop | Derty). Date transfer |
| City State ZIP Code Within 2 years before you filed for bankru ransferred in the ordinary course of you nclude both outright transfers and transfers On not include gifts and transfers that you h | r business or financial affairs? s made as security (such as the granting o ave already listed on this statement. Description and value of property | f a security interest or m Describe any property | ortgage on your prop | Derty). Date transfer |
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| City State ZIP Code Within 2 years before you filed for bankry ransferred in the ordinary course of you not located both outright transfers and transfers to not include gifts and transfers that you have not located and transfer not located and transf | r business or financial affairs? s made as security (such as the granting o ave already listed on this statement. Description and value of property | f a security interest or m Describe any property | ortgage on your prop | Derty). Date transfer |
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| ebtor 1 | Takara Nichele Jackson First Name Middle Name Last N | lame | Cas | e number (if knowr | 7) | |
|-------------------|---|-------------------------------------|--------------------|--------------------|--|--|
| 10 Wi t | hin 10 years before you filed for bankrup | utov, did vou transfer any propert | v to a self- | sattlad trust d | or similar device of wh | nich vou |
| | e a beneficiary? (These are often called as | | y to a sen- | settieu trust c | or similar device or wi | nen you |
| | No Yes. Fill in the details. | | | | | |
| | | Description and value of the prope | rty transferr | ed | | Date transfer was made |
| | Name of trust | | | | | |
| | | | | | | |
| Part 8 | 3: List Certain Financial Accounts | Instruments, Safe Deposit E | Boxes, an | d Storage U | nits | |
| clo Inc bro | thin 1 year before you filed for bankrupto sed, sold, moved, or transferred? clude checking, savings, money market, okerage houses, pension funds, coopera No | or other financial accounts; certif | icates of d | leposit; share | | |
| | Yes. Fill in the details. | | | | | |
| | | Last 4 digits of account number | Type of a instrume | | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| | Name of Financial Institution | xxxx | Check | _ | | \$ |
| | Number Street | | Savin Mone | y market | | |
| | City State ZIP Code | | Other | _ | | |
| | Name of Financial Institution | XXXX | ☐ Check | | | \$ |
| | Number Street | | ☐ Mone | erage | | |
| | City State ZIP Code | | U Other | | | |
| sec X | you now have, or did you have within 1 gourities, cash, or other valuables? No Yes. Fill in the details. | year before you filed for bankrup | tcy, any sa | fe deposit bo | x or other depository | for |
| | | Who else had access to it? | | Describe the | contents | Do you still have it? |
| | Name of Financial Institution | Name | | | | No Yes ✓ Yes ✓ No No |
| | Number Street | Number Street | | | | |
| | City State 7ID Code | City State ZIP Code | | | | |

Debtor 1

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Case number (if known)___

Takara Nichele Jackson

Debtor 1

| First Name Middle Name | Last Name | | |
|--|--|---|--------------------------------|
| | | | |
| . Have you stored property in a storage M No | unit or place other than your home within 1 | year before you filed for bankruptcy? | • |
| Yes. Fill in the details. | | | |
| _ | Who else has or had access to it? | Describe the contents | Do you still |
| | | | have it? |
| | | | □ No |
| Name of Storage Facility | Name | | ☐ Yes |
| Number Street | Number Street | | |
| Name of the control o | Number Circuit | | |
| | City State ZIP Code | | |
| City State ZIP C | code | | |
| | | | |
| Identify Property You H | lold or Control for Someone Else | | |
| . Do you hold or control any property | that someone else owns? Include any proper | ty you borrowed from, are storing fo | r, |
| or hold in trust for someone. | | | |
| No Yes. Fill in the details. | | | |
| res. Fill in the details. | Where is the property? | Describe the property | Value |
| | militare to the property. | Booking the property | Value |
| Owner's Name | | | \$ |
| C | | | Ψ |
| | | | |
| Number Street | Number Street | | |
| Number Street | Number Street | | |
| | City State ZIP Code | | |
| City State ZIP C | City State ZIP Code | , | |
| City State ZIP C | City State ZIP Code | , | |
| City State ZIP C Give Details About Env | City State ZIP Code | , | |
| City State ZIP Correct 10: Give Details About Environmental law means any federal | ironmental Information g definitions apply: al, state, or local statute or regulation concer | ning pollution, contamination, releas | |
| City State ZIP Corrections of Part 10: Give Details About Environmental law means any federal hazardous or toxic substances, was | ironmental Information g definitions apply: al, state, or local statute or regulation concertes, or material into the air, land, soil, surface | ning pollution, contamination, releas water, groundwater, or other mediu | |
| City State ZIP Control 10: Give Details About Environmental law means any federal hazardous or toxic substances, was including statutes or regulations control 10: City State State ZIP Control 10: City State | code City State ZIP Code ironmental Information g definitions apply: al, state, or local statute or regulation concertes, or material into the air, land, soil, surface atrolling the cleanup of these substances, wa | ning pollution, contamination, releas water, groundwater, or other mediu stes, or material. | m, |
| Give Details About Enveronmental law means any federal hazardous or toxic substances, was including statutes or regulations correctly. | city State ZIP Code ironmental Information g definitions apply: al, state, or local statute or regulation concertes, or material into the air, land, soil, surface introlling the cleanup of these substances, was property as defined under any environmental | ning pollution, contamination, releas water, groundwater, or other mediu stes, or material. | m, |
| Give Details About Environmental law means any federal hazardous or toxic substances, was including statutes or regulations corditor used to own, operate, or utilize in | city State ZIP Code ironmental Information g definitions apply: al, state, or local statute or regulation concertes, or material into the air, land, soil, surface introlling the cleanup of these substances, was property as defined under any environmental | ning pollution, contamination, releas water, groundwater, or other mediu stes, or material. law, whether you now own, operate, | m, or utilize |
| Give Details About Environmental law means any federal hazardous or toxic substances, was including statutes or regulations corditor used to own, operate, or utilize in | city State ZIP Code ironmental Information g definitions apply: al, state, or local statute or regulation concertes, or material into the air, land, soil, surface attrolling the cleanup of these substances, was property as defined under any environmental it, including disposal sites. an environmental law defines as a hazardous | ning pollution, contamination, releas water, groundwater, or other mediu stes, or material. law, whether you now own, operate, | m, or utilize |
| Give Details About Environmental law means any federa hazardous or toxic substances, was including statutes or regulations cor Site means any location, facility, or pit or used to own, operate, or utilize it Hazardous material means anything substance, hazardous material, pollular | city State ZIP Code ironmental Information g definitions apply: al, state, or local statute or regulation concertes, or material into the air, land, soil, surface attrolling the cleanup of these substances, was property as defined under any environmental it, including disposal sites. an environmental law defines as a hazardous | ning pollution, contamination, releas water, groundwater, or other mediu stes, or material. law, whether you now own, operate, s waste, hazardous substance, toxic | m, or utilize |
| Give Details About Environmental law means any federa hazardous or toxic substances, was including statutes or regulations cor Site means any location, facility, or pit or used to own, operate, or utilize in Hazardous material means anything substance, hazardous material, pollute port all notices, releases, and procee | city State ZIP Code ironmental Information g definitions apply: al, state, or local statute or regulation concertes, or material into the air, land, soil, surface atrolling the cleanup of these substances, was property as defined under any environmental it, including disposal sites. an environmental law defines as a hazardous utant, contaminant, or similar term. | ning pollution, contamination, releas water, groundwater, or other mediu stes, or material. law, whether you now own, operate, s waste, hazardous substance, toxic en they occurred. | m, or utilize |
| Gity State ZIP Corrections of Part 10: Give Details About Environmental law means any federal hazardous or toxic substances, was including statutes or regulations corrections it or used to own, operate, or utilize in Hazardous material means anything substance, hazardous material, polluteport all notices, releases, and proceed | city State ZIP Code ironmental Information g definitions apply: al, state, or local statute or regulation concertes, or material into the air, land, soil, surface atrolling the cleanup of these substances, was property as defined under any environmental it, including disposal sites. an environmental law defines as a hazardous utant, contaminant, or similar term. | ning pollution, contamination, releas water, groundwater, or other mediu stes, or material. law, whether you now own, operate, s waste, hazardous substance, toxic en they occurred. | m, or utilize |
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| Give Details About Environmental law means any federal hazardous or toxic substances, was including statutes or regulations corsite means any location, facility, or pit or used to own, operate, or utilize in Hazardous material means anything substance, hazardous material, pollule port all notices, releases, and proceed. Has any governmental unit notified years. | city State ZIP Code ironmental Information g definitions apply: al, state, or local statute or regulation concertes, or material into the air, land, soil, surface ntrolling the cleanup of these substances, was property as defined under any environmental it, including disposal sites. an environmental law defines as a hazardous utant, contaminant, or similar term. edings that you know about, regardless of whom that you may be liable or potentially liable | ning pollution, contamination, releas water, groundwater, or other mediu stes, or material. law, whether you now own, operate, s waste, hazardous substance, toxic en they occurred. under or in violation of an environm | m, or utilize ental law? |
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Debtor 1 Takara Nichele Jackson
First Name Middle Name Last Name

Last Name

Last Name

Last Name

| Yes. Fill in the details. Governmental unit | Voc Eill in the details | | | |
|--|---|--|---|---|
| Name of site Number Street Number Street State ZIF Code | res. Fin in the details. | | | |
| Number Street Number Street Number Street | | Governmental unit | Environmental law, if you know it | Date of notice |
| Number Street Number Street Number Street | | | | |
| City State ZIP Code Veryou been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Court or agency Nature of the case Case title Court Name Pending On apper | Name of site | Governmental unit | | |
| re you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Court or agency Nature of the case Status of th case Case title Court Name Number Street Case number City State ZIP Code City State | Number Street | Number Street | | |
| Per you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Court or agency | | City State ZIP Coo | le | |
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| Yes. Fill in the details. Court or agency | | ial or administrative proceeding under | any environmental law? Include settlement | s and orders. |
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| Court Name Number Street Conclud Pending On appe Conclud Conclud | • | , | 1 | case |
| Case number City State ZIP Code | Case title | Court Name | | ☐ Pending |
| Case number City State ZIP Code Give Details About Your Business or Connections to Any Business | | | | On appe |
| It: Give Details About Your Business or Connections to Any Business thin 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. Business Name Number Street Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. EIN: | | Number Street | | ☐ Conclud |
| State ZIP Code | Case number | | | |
| □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. EIN: | | | | |
| An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. EIN: | ☐ A sole proprietor or self-em | bankruptcy, did you own a business on ployed in a trade, profession, or othe | or have any of the following connections to a ractivity, either full-time or part-time | ny business? |
| No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. EIN: | □ A sole proprietor or self-em□ A member of a limited liabil□ A partner in a partnership | bankruptcy, did you own a business on ployed in a trade, profession, or othe lity company (LLC) or limited liability p | or have any of the following connections to a ractivity, either full-time or part-time | ny business? |
| Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business | □ A sole proprietor or self-em □ A member of a limited liabil □ A partner in a partnership □ An officer, director, or man | bankruptcy, did you own a business on ployed in a trade, profession, or othe lity company (LLC) or limited liability paging executive of a corporation | or have any of the following connections to a r activity, either full-time or part-time partnership (LLP) | ny business? |
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| Business Name Do not include Social Security number or ITIN. | □ A sole proprietor or self-em □ A member of a limited liabil □ A partner in a partnership □ An officer, director, or man □ An owner of at least 5% of the liabil □ No. None of the above applies. | bankruptcy, did you own a business on ployed in a trade, profession, or othe lity company (LLC) or limited liability p aging executive of a corporation the voting or equity securities of a cor Go to Part 12. | or have any of the following connections to a r activity, either full-time or part-time partnership (LLP) poration | ny business? |
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| City State ZIP Code Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. EIN: | □ A sole proprietor or self-em □ A member of a limited liabil □ A partner in a partnership □ An officer, director, or man □ An owner of at least 5% of the No. None of the above applies. Yes. Check all that apply above | bankruptcy, did you own a business on ployed in a trade, profession, or other lity company (LLC) or limited liability programme aging executive of a corporation the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting or each programme and fill in the details below for each programme. | por have any of the following connections to a ractivity, either full-time or part-time partnership (LLP) poration business Employer Identification Do not include Social S | n number Security number or ITIN. |
| Business Name Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. EIN: | □ A sole proprietor or self-em □ A member of a limited liabil □ A partner in a partnership □ An officer, director, or man □ An owner of at least 5% of the No. None of the above applies. Yes. Check all that apply above | bankruptcy, did you own a business on ployed in a trade, profession, or other lity company (LLC) or limited liability programme aging executive of a corporation the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting or each programme and fill in the details below for each programme. | por have any of the following connections to a ractivity, either full-time or part-time partnership (LLP) poration business Employer Identification Do not include Social S | n number Security number or ITIN. |
| Business Name Do not include Social Security number or ITIN. EIN: | □ A sole proprietor or self-em □ A member of a limited liabil □ A partner in a partnership □ An officer, director, or man □ An owner of at least 5% of the No. None of the above applies. Yes. Check all that apply above | bankruptcy, did you own a business on ployed in a trade, profession, or other lity company (LLC) or limited liability programme aging executive of a corporation the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting or each programme and fill in the details below for each programme. | por have any of the following connections to a ractivity, either full-time or part-time partnership (LLP) poration business Employer Identification Do not include Social services EIN: | n number Security number or ITIN. |
| EIN: | □ A sole proprietor or self-em □ A member of a limited liabil □ A partner in a partnership □ An officer, director, or man □ An owner of at least 5% of the self-embedding self-embedding. No. None of the above applies. Yes. Check all that apply above Business Name Number Street | bankruptcy, did you own a business of aployed in a trade, profession, or other lity company (LLC) or limited liability programme aging executive of a corporation the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting or each of the details below for each of the voting of the | por have any of the following connections to a ractivity, either full-time or part-time partnership (LLP) poration business Employer Identification Do not include Social services EIN: | n number Security number or ITIN. |
| Number Street | □ A sole proprietor or self-em □ A member of a limited liabil □ A partner in a partnership □ An officer, director, or man □ An owner of at least 5% of the self-embedding self-embedding. No. None of the above applies. Yes. Check all that apply above Business Name Number Street | bankruptcy, did you own a business of aployed in a trade, profession, or other lity company (LLC) or limited liability programment aging executive of a corporation the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting of th | por have any of the following connections to a ractivity, either full-time or part-time partnership (LLP) poration business Employer Identification Do not include Social 3 EIN: eeper Dates business existed From To | n number Security number or ITIN. d n number |
| | □ A sole proprietor or self-em □ A member of a limited liabil □ A partner in a partnership □ An officer, director, or man □ An owner of at least 5% of the self o | bankruptcy, did you own a business of aployed in a trade, profession, or other lity company (LLC) or limited liability programment aging executive of a corporation the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting of th | por have any of the following connections to a ractivity, either full-time or part-time partnership (LLP) poration business Employer Identification Do not include Social 3 EIN: eeper Dates business existed From To | n number Security number or ITIN. d n number |
| | □ A sole proprietor or self-em □ A member of a limited liabil □ A partner in a partnership □ An officer, director, or man □ An owner of at least 5% of the self o | bankruptcy, did you own a business of aployed in a trade, profession, or other lity company (LLC) or limited liability programment aging executive of a corporation the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting or equity securities of a corporation of the voting of th | por have any of the following connections to a ractivity, either full-time or part-time partnership (LLP) poration business Employer Identification Do not include Social 3 EIN: eeper Dates business existed From To siness Employer Identification Do not include Social 3 | n number Security number or ITIN. d n number Security number or ITIN. |
| | □ A sole proprietor or self-em □ A member of a limited liabil □ A partner in a partnership □ An officer, director, or man □ An owner of at least 5% of the self o | bankruptcy, did you own a business of apployed in a trade, profession, or other lity company (LLC) or limited liability programmer againg executive of a corporation the voting or equity securities of a corporation. Go to Part 12. The and fill in the details below for each Describe the nature of the buse. Name of accountant or books. P Code Describe the nature of the buse. | por have any of the following connections to a ractivity, either full-time or part-time partnership (LLP) poration business Employer Identification Do not include Social 3 EIN: eeper Dates business existed From To siness Employer Identification Do not include Social 3 EIN: To siness Employer Identification Do not include Social 3 EIN: = | n number Security number or ITIN. d n number Security number or ITIN. |
| City State ZIP Code | □ A sole proprietor or self-em □ A member of a limited liabil □ A partner in a partnership □ An officer, director, or man □ An owner of at least 5% of at the self-embed self-e | bankruptcy, did you own a business of a ployed in a trade, profession, or other lity company (LLC) or limited liability programmer aging executive of a corporation the voting or equity securities of a corporation. Go to Part 12. Be and fill in the details below for each Describe the nature of the buse. Name of accountant or books. P Code Name of accountant or books. | por have any of the following connections to a ractivity, either full-time or part-time partnership (LLP) poration business Employer Identification Do not include Social 3 EIN: eeper Dates business existed From To siness Employer Identification Do not include Social 3 EIN: To siness Employer Identification Do not include Social 3 EIN: = | n number Security number or ITIN. d n number Security number or ITIN. |

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Case number (if known)_

Takara Nichele Jackson
First Name Middle Name

Last Name

Debtor 1

| | Describe the nature of the business | Employer Identification number |
|---|---------------------------------------|---|
| Business Name | | Do not include Social Security number or ITIN. |
| Business Name | | EIN: |
| Number Street | Name of accountant or bookkeeper | Dates business existed |
| | | |
| | | From To |
| City State ZIP Code | | |
| 28. Within 2 years before you filed for bankruptor institutions, creditors, or other parties. ☑ No ☐ Yes. Fill in the details below. | cy, did you give a financial stateme | nt to anyone about your business? Include all financial |
| | Date issued | |
| | | |
| Name | MM / DD / YYYY | |
| Number Office | | |
| Number Street | | |
| | | |
| City State ZIP Code | | |
| • | | |
| | | |
| | | |
| Part 12: Sign Below | | |
| | | ments, and I declare under penalty of perjury that the |
| answers are true and correct. I understand in connection with a bankruptcy case can | | ncealing property, or obtaining money or property by fraud aprisonment for up to 20 years, or both. |
| 18 U.S.C. §§ 152, 1341, 1519, and 3571. | , , , | • • • |
| | | |
| ★s/Takara Nichele Jackson | * | |
| Signature of Debtor 1 | Signature of Debtor | 2 |
| 04/02/2040 | | |
| Date 04/03/2019 | Date | |
| | atement of Financial Affairs for Inc | lividuals Filing for Bankruptcy (Official Form 107)? |
| X No □ Yes | | |
| ☐ Yes | | |
| Did you pay or agree to pay someone who | is not an attorney to halp you fill o | ut bankruntey forms? |
| No | is not an attorney to neip you fill o | ut balliti uptoy lorillo: |
| Yes. Name of person | | |
| | | Declaration, and Signature (Official Form 119). |
| | | |

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| Fill in this inf | formation to ide | entify your case: | | |
|---------------------------------|--------------------|----------------------------|-----------|--|
| Debtor 1 | Takara Nichel | e Jackson Middle Name | Last Name | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States F | Bankruptcy Court f | or the: Eastern District O | of Texas | |
| Case number (If known) | | | | |
| | | | | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the propert as exempt on Schedule C |
|---|--|--|
| Creditor's | ☐ Surrender the property. | ☐ No |
| name: | Retain the property and redeem it. | ☐ Yes |
| Description of property securing debt: | Retain the property and enter into a Reaffirmation Agreement. | |
| accaining accai | Retain the property and [explain]: | |
| Creditor's | ☐ Surrender the property. | □ No |
| name: | Retain the property and redeem it. | ☐ Yes |
| Description of property securing debt: | Retain the property and enter into a Reaffirmation Agreement. | |
| occurring doos. | ☐ Retain the property and [explain]: | |
| Creditor's | ☐ Surrender the property. | □ No |
| name: | Retain the property and redeem it. | Yes |
| Description of property securing debt: | Retain the property and enter into a Reaffirmation Agreement. | |
| | ☐ Retain the property and [explain]: | |
| Creditor's | ☐ Surrender the property. | ☐ No |
| name: | Retain the property and redeem it. | Yes |
| Description of property securing debt: | Retain the property and enter into a Reaffirmation Agreement. | |
| | Retain the property and [explain]: | |

12/15

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Takara Nichele Jackson
First Name Middle Name Your name

Last Name

Case number (If known)_

| the information below. Do not list real estate leases. <i>Unexpired leases</i> are leases the d. You may assume an unexpired personal property lease if the trustee does not assume | |
|---|--|
| Describe your unexpired personal property leases | Will the lease be assumed? |
| essor's name: Frankford Flats | ☐ No |
| escription of leased roperty: Apartment Lease | ☑ Yes |
| essor's name: | ☐ No |
| escription of leased roperty: | ☐ Yes |
| essor's name: | No |
| escription of leased roperty: | ☐ Yes |
| essor's name: | □ No □ Yes |
| escription of leased roperty: | □ Yes |
| essor's name: | □ No |
| escription of leased roperty: | ☐ Yes |
| essor's name: | □ No |
| escription of leased roperty: | ☐ Yes |
| essor's name: | □ No |
| escription of leased roperty: | ☐ Yes |
| 3: Sign Below der penalty of perjury, I declare that I have indicated my intention about any property | y of my actate that secures a debt and any |

Date 04/03/2019

MM / DD / YYYY

Date MM / DD / YYYY

Entered 04/03/19 16:41:10 Desc Main Case 19-40922 Doc 1 Filed 04/03/19 Fill in this information to identify your case: Check one box only as directed in this form and in Form 122A-1Supp: Takara Nichele Jackson Debtor 1 1. There is no presumption of abuse. Debtor 2 (Spouse, if filing) First Name Middle Name Last Name 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 **EASTERN DISTRICT OF TEXAS** United States Bankruptcy Court for the: Means Test Calculation (Official Form 122A-2). 3. The Means Test does not apply now because of (If known) qualified military service but it could apply later. Check if this is an amended filing Official Form 122A-1 Chapter 7 Statement of Your Current Monthly Income 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form. Part 1: **Calculate Your Current Monthly Income** 1. What is your marital and filing status? Check one only. Not married. Fill out Column A, lines 2-11. ☐ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11. ■ Married and your spouse is NOT filing with you. You and your spouse are: Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B). Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions \$4,120.48 (before all payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if \$0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not \$0.00 filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, profession, Debtor 1 Debtor 2 or farm Gross receipts (before all deductions) Ordinary and necessary operating expenses Copy Net monthly income from a business, profession, or farm \$0.00 \$0.00 6. Net income from rental and other real property Debtor 1 Debtor 2 \$ Gross receipts (before all deductions) Ordinary and necessary operating expenses

Net monthly income from rental or other real property

7. Interest, dividends, and royalties

Copy

\$0.00

\$0.00

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| btor 1 | Takara Nichele Jackson First Name Middle Name Last Name | | Case number (if know | wn) | | |
|--------------|--|--|----------------------|---------|--|------------------------------|
| | | | Column A Debtor 1 | | Column B Debtor 2 or non-filing spouse | 9 |
| Uner | nployment compensation | | \$0.00 | | \$ | |
| unde | ot enter the amount if you contend that the amount or the Social Security Act. Instead, list it here: | Ψ | · | _ | · | - |
| | or youor your spouse | | | | | |
| | sion or retirement income. Do not include any ar | · | | | | |
| | efit under the Social Security Act. | nount received that was a | \$ <u>0.00</u> | _ | \$ | |
| Do n as a | me from all other sources not listed above. Special include any benefits received under the Social victim of a war crime, a crime against humanity, or irism. If necessary, list other sources on a separate | Security Act or payments received rinternational or domestic | I | | | |
| | | | \$ | | \$ | |
| | | | \$ | | \$ | |
| Tot | al amounts from separate pages, if any. | | + \$0.00 | - | + \$ | - |
| | sulate your total current monthly income. Add line mn. Then add the total for Column A to the total for | | \$ <u>4,</u> 120.48 | + | \$ | = _{\$4,120.48} |
| | | | | | | Total current monthly income |
| Part 2: | Determine Whether the Means Test A | oplies to You | | | | |
| 2 Calc | ulate your current monthly income for the year | Follow these steps: | | | | |
| 12a. | | · | | Copy | line 11 here | \$4,120.48 |
| | Multiply by 12 (the number of months in a year). | | | | | x 12 |
| 12b. | The result is your annual income for this part of t | he form. | | | 12b. | \$49,445.76 |
| . . . | | | | | | |
| 3. Caic | ulate the median family income that applies to | you. Follow these steps: | | | | |
| Fill in | n the state in which you live. | Texas | | | | |
| Fill in | n the number of people in your household. | 2 | | | | |
| | n the median family income for your state and size | | | | 13. | \$63,869.00 |
| instr | nd a list of applicable median income amounts, go uctions for this form. This list may also be available | online using the link specified in the at the bankruptcy clerk's office. | ne separate | | | |
| 4. How | do the lines compare? | | | | | |
| | | | | | of abuse | |
| 14a. | Line 12b is less than or equal to line 13. On the Go to Part 3. | e top of page 1, check box 1, The | ere is no presum | ption (| or abase. | |
| 14a. 14b. | Go to Part 3. | | | | | ?A-2. |
| | Go to Part 3. Line 12b is more than line 13. On the top of pa Go to Part 3 and fill out Form 122A–2. | | | | | P.A-2. |
| 14b. | Go to Part 3. Line 12b is more than line 13. On the top of pa Go to Part 3 and fill out Form 122A–2. | age 1, check box 2, <i>The presump</i> | tion of abuse is o | determ | nined by Form 122 | |
| 14b. | Go to Part 3. Line 12b is more than line 13. On the top of part 3 and fill out Form 122A–2. Sign Below By signing here, I declare under penalty of perjord. | age 1, check box 2, The presump | tion of abuse is o | determ | nined by Form 122 | |
| 14b. | Go to Part 3. Line 12b is more than line 13. On the top of part Go to Part 3 and fill out Form 122A–2. Sign Below By signing here, I declare under penalty of periods. **S/Takara Nichele Jackson** | age 1, check box 2, The presump ury that the information on this sta | tion of abuse is o | determ | nined by Form 122 | |
| 14b. | Go to Part 3. Line 12b is more than line 13. On the top of part 3 and fill out Form 122A–2. Sign Below By signing here, I declare under penalty of perjord. | age 1, check box 2, The presump ury that the information on this sta | atement and in a | determ | nined by Form 122 | |

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court EASTERN DISTRICT OF TEXAS

| [n | re Takara Nichele Jackson | |
|--|---|--|
| | | Case No |
| De | ebtor | Chapter 7 |
| | DISCLOSURE OF COMPENSA | ATION OF ATTORNEY FOR DEBTOR |
| 1. | named debtor(s) and that compensation paid to n | P. 2016(b), I certify that I am the attorney for the above ne within one year before the filing of the petition in the rendered or to be rendered on behalf of the debtor(s) in auptcy case is as follows: |
| | For legal services, I have agreed to accept | \$ <u>1,500.00</u> |
| | Prior to the filing of this statement I have receive | d |
| | Balance Due | \$ <u>750.00</u> |
| 2. | The source of the compensation paid to me was: | |
| | Debtor Other (specif | y) |
| 3. The source of compensation to be paid to me is: | | |
| | Debtor Other (specif | y) |
| 4. | I have not agreed to share the above-disc members and associates of my law firm. | closed compensation with any other person unless they are |
| | | ed compensation with a other person or persons who are not py of the agreement, together with a list of the names of the ned. |
| 5. | In return for the above-disclosed fee, I have agree case, including: | ed to render legal service for all aspects of the bankruptcy |
| | a. Analysis of the debtor's financial situation, a file a petition in bankruptcy; | and rendering advice to the debtor in determining whether to |
| | b. Preparation and filing of any petition, schedu | ales, statements of affairs and plan which may be required; |
| | c. Representation of the debtor at the meeting of hearings thereof; | of creditors and confirmation hearing, and any adjourned |

| А | Panracantation of the debtor in adversary proceedings and other contacted bankruptcy matters: |
|----|--|
| u. | Representation of the decitor in adversary proceedings and other contested bankruptcy matters, |

e. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

April 3, 2019

s//s/Michael B. Suffness

Date

Signature of Attorney

Michael B. Suffness PC

Name of law firm

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Ace Cash Express 18110 Midway Dallas,TX 75287

American First Finance 8585 N. Stemmons Fwy. Dallas, TX 75247

American Honda Finance 20800 Madrona Avenue Torrance, CA 90503

Better Cash 8610 S. Sandy Parkway Sandy, UT 84070

Capital One 1680 Capital One Drive McLean, VA 22102

Centerpoint Apartments 2626 Frankford Road Dallas, TX 75287

Chase Bank 270 Park Avenue New York, NY 10017

Commonwealth Edison PO Box 805379 Chicago, IL 60680

Conns 2445 Technology Forest Blvd. The Woodlands, TX 77381

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Credit One 6801 S. Cimarron Road Las Vegas, NV 89113

Fingerhut 6509 Flying Clud Eden Prairie,MN 55344

Frankford Flats 2601 Frankford Road Dallas, TX 75287

Friendly Finance 6430 Security Blvd Baltimore, MD 21207

Frontier Communications 401 Merritt 7
Norwalk,CT 06851

Lane Bryant One Righter Bank Wilmington, DE 19803

Moneylion 30 W. 21st St. Floor 9 New York, NY 10010

Overland Bond 4701 Fullerton Chicago, IL 60639

People's Gas 200 E. Randolph Chicago,IL 60601

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Progressive Leasing 5651 W. Talavi Blvd. Glendale, AZ 85306

RBFCU PO Box 2097 Universal City,TX 78148

Spectrum 400 Atlantic St. Stamford, CT 06901

Speedy Cash Loans Garland, TX 75042

Texas Health 6200 W. Parker Road Plano,TX 75093

Texas Health 4535 Frankford Road Dallas, TX 75287 Case 19-40922 Doc 1 Filed 04/03/19 Entered 04/03/19 16:41:10 Desc Main Document Page 63 of 63 LBR Appendix 1007-b-6

Revised 12/1/2009

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF TEXAS

| IN RE: | |
|----------------------------------|---|
| Takara Nichele Jackson Debtor(s) | Bankruptcy Case Number |
| | ATION OF CREDITOR MATRIX verifies that the attached list of creditors is true and correct to |
| the best of my/our knowledge. | |
| Date: April 3, 2019 | s/Takara Nichele Jackson Debtor Signature |
| Date: | Joint Debtor Signature |